

# THE BRITISH JOURNAL OF DELINQUENCY

A SPECIAL NUMBER DEVOTED TO THE PROBLEMS OF PSYCHOPATHIC OFFENDERS

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## EDITORIAL

In presenting a special psychopathic number the Editors are not under any illusion, nor would they have their readers infer, that they are acting from strength. On the contrary, they are well aware that fifty years of sporadic investigation of the subject have resulted in little more than a profusion of contending generalizations; that, in fact, our understanding of psychopathy is still rudimentary and our researches wretchedly inadequate. They are equally well aware that, following the popular clamour for effective measures of crime prevention, the existing facilities and shibboleths of psychiatry and of social psychology will tend to be applied to the problem somewhat hastily and without due regard to their suitability. Inevitably therefore the poverty of our etiological formulations will continue to be cloaked to some extent in technicalities which do little more than express the theoretical preconceptions of their sponsors. For it must be admitted that the current wave of psychological and sociological interest in delinquency has created a false impression, amongst technical workers as well as the lay public, that we already know all that is to be known about the causes of crime. All of which merely points the necessity of producing at frequent intervals 'special numbers' on psychopathy, preferably devoted to those many matters concerning which we know next to nothing.

One indisputable gain accruing from recent investigations can, however, be recorded. It is no longer possible to maintain without fear of brisk contradiction that the concept of psychopathy is a psychiatric fiction covering inadequacies in clinical classification. However slight the descriptive value of the caption may be, psychopathy has now emerged as the most important of the great transitional groups of mental disorder: meaning by transitional that the group occupies a fixed intermediate position in a hierarchy of developmental disorders, combining some of the characteristics of the

more familiar psycho-pathological states (psycho-neurotic, psycho-sexual, psychotic and characterological) in a framework which is often difficult to distinguish from that of the so-called normal individual, or, at any rate, from that which passed as normal among our more immediate ancestors.

Equally inevitable is the necessity to direct our researches in the first instance towards those root-problems which give rise to acute differences of scientific opinion. For no sooner do we suggest that the psychopathy of one age or generation may have been the 'normal' reaction of an earlier stage of racial development than we stir up the long-standing controversy between the 'constitutionalists' and the 'environmentalists'; between those who regard mental disorders as being determined in the main by factors of inheritance and those who are convinced that they are due in the main to the processes of upbringing. And not only a controversy between these 'central' and 'peripheral' schools respectively, but an internecine war in the constitutional camp. For the central school is clearly divided into those who, pessimistically enough, attach most weight to inheritance and those who believe that during early childhood specifically endopsychic factors combine with specific environmental factors to bring about a *specific pre-disposition* to psychopathy. Here we have one of the key problems in research, failing a solution to which the conclusions arrived at by more circumscribed and fragile researches must remain for the time being in the air.

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In this connection it should be observed that one of the most persistent causes of pessimism with regard to the cure of mental disorders arises from a belief in the constitutional or genetic factor. This belief pervades the whole of psychiatry and perhaps in the case of delinquency where a 'criminal type' was held to exist it has been an easy line of retreat. Since Galton the study of twins has been a means of substantiating this attitude; and in recent years the technique of studying monozygotic twins has been fruitful in the tracing of genetic destiny in schizophrenia and to a less degree in manic depressive psychosis. No dispassionate geneticist to-day accepts the false dichotomy of heredity and environment. The study we publish in this issue is a striking example of the exceptions to the rule that monozygotic twins are destined to follow the same historic unfolding, for, whatever be the closeness of environmental history in the first few years of life, divergences can still occur. Rosanoff, who was as aware as any of genetic factors determining personality and its divergences, quoted a number of discordants in monozygotes, although he regarded birth trauma as a determining factor. But there are too many cases without evidence of such birth traumas to



allow us to rest satisfied without postulating influences other than genetic and birth traumas.

Lange's study, the volume 'Crime as Destiny', certainly brings into the limelight some striking cases, but there are, to be sure, two types of destiny: that which operates pre-natally and dependent on gene endowment, and that which operates post-natally as a result of environmental pressures. These may be nutritional and psychological. The latter is an expression through parental methods of nurture of a long cultural trend. The plasticity of the child in its early months and years has been shown by psychoanalysis to make it possible for a variety of mental patterns to emerge. Even genetic factors have some degree of plasticity; for some of them are not in action at birth but emerge and operate well into puberty, possibly in a diminishing degree till the senium. To this extent genetic and environmental factors can operate together and perhaps mutually influence one another. Within the frame of endowment many variations are possible. In our published case the brothers were different in moral organization and in social adaptability to a high degree. One was delinquent, the other morally stable, but perhaps in his case a genetic defect emerges in the epileptiform attacks. The genetic answer is therefore unsatisfactory when applied to complex forms of conduct for which we have ample cultural explanations; and with regard to delinquency we are confronted by social factors which cannot be ignored. The subject needs further clarification, particularly in regard to nomenclature. We are still some distance from a clear differentiation of such terms as temperament and predisposition, a term sometimes equated with constitution and sometimes with the results of early influences which lay down irrevocable patterns.

The dimensions of personality are not definitely blue-printed at birth as some claim. Time and place and circumstances are factors which work within the framework of genetic endowment, altering the proportions of these dimensions, and therefore character and its deviations.

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Naturally, the lawyer, the legislator and the penal administrator have, in the past, been greatly hampered by the unsatisfactory state of psychiatric knowledge. Called upon to provide special laws and penological techniques for psychopathic offenders, they found a complete absence of even such simple requirements as a universally accepted and legally workable definition of psychopathy or a fair consensus of opinion regarding the most promising methods of treatment. No wonder they tended either to do nothing or to do the wrong thing! Either the legal existence of psychopathy was completely ignored by the criminal law or the, apparently unassailable, con-



clusion was drawn that psychopathic offenders, being less abnormal than psychotic cases and less normal than the average, should receive more lenient punishment. Slowly, under the influence of psychiatrists such as Karl Wilmanns and others, it became more widely recognized that the psychopathic offender should be treated by the law not more leniently but differently from the normal. However, as so often happens, this new idea has in recent years occasionally been put into operation without due regard to existing facilities. American legislators, harassed by an outraged public opinion, seem to have overlooked the fact that differentiation in legal treatment presupposes, first of all, the possibility of establishing a clear-cut definition of psychopathy; secondly, the existence of judicial machinery capable of applying this definition; and thirdly, adequate facilities for treatment within or without the penal system. As is so clearly shown by American criminologists such as Tappan and Sutherland, as well as in Dr. Gibbens' article below, most of the U.S. laws regarding sexual psychopathy were formulated and put into operation regardless of the existence of these three prerequisites; in some states indeed the requirement of a criminal charge was renounced and the competence of a civil court substituted for that of a criminal court.

English law has so far made no attempt to define what has for so long remained apparently undefinable. In contradistinction to American legislation, it has, however, also abstained from concerting any extraordinary measures against the psychopath. He may be treated either on probation or in prison, but the length of his sentence is, in the first place, determined by the court; nor are any special penal institutions provided for him. While this may seem to be a somewhat over-cautious attitude, there are certain indications that new developments may become possible in the not too distant future. First, as Sir David Henderson stresses and Dr. Stafford-Clark and his fellow-workers demonstrate in greater detail, psychiatrists are now more confident that they can provide the basis for a workable definition of the psychopathic state—at present perhaps only for their own use, but eventually, it is hoped, also for the use of the legislator and the judge. This, it may be presumed, will be a definition no longer dependent primarily on such chance factors as recidivism. Secondly, the establishment of a special institution for psychopathic and similarly abnormal prisoners, accepted in principle by the Prison Commission long ago, has now been so strongly recommended in the Report on Punishments in Prisons and Borstal Institutions that it can hardly be further delayed. Even if, as Dr. Gibbens points out, the provision in this country of facilities comparable to those existing in Denmark calls for not one but twelve institutions of the kind and size of Herstedvester (Dr. Stafford-Clark and his colleagues give an estimate of 5 per cent. of convicted



prisoners), it is of paramount importance that at least a beginning should be made, on however small a scale. Incidentally the adequate staffing of the Prison Medical Service, a point concerning which the Report on Punishment makes equally emphatic recommendations, will be a prerequisite of any progress in the diagnosis and treatment of the psychopath in prison. Once these technical difficulties have been overcome, the thorny problem of the indeterminate sentence can be tackled.

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The English prison system has recently come under heavy fire in an article by Professor Negley K. Teeters, of Temple University, Philadelphia, in *The Journal of Criminal Law and Criminology* (see the abstract below, p. 189). This article embodies Dr. Teeters' impressions 'after a six weeks' tour of some twenty-five prisons and Borstals in England during the summer of 1949', as a result of which he states that 'the British prisons, with only a few bright exceptions, are still dominated by uniformity, monotony and drabness, far in excess of what we find in most of our institutions'. 'Allowing for the difficulties under which the Prison Commission labors', he writes, 'it can truthfully be asserted that there is an almost complete lack of imagination, resourcefulness and dynamics reflected in the traditional aspects of prison life throughout the realm'.

We hold no brief from the Prison Commissioners who, like all penologists genuinely interested in prison reform, will no doubt be grateful to Professor Teeters for his frankness. Nor is this the place to go into details, some of which have already been effectively dealt with by Dr. Gibbens in the same issue of the *Journal*. His article raises, however, some points of importance which seem to require an equally frank reply. Professor Teeters is no doubt familiar with the jocular saying that those who have stayed in a foreign country for six weeks write a book about it, those who have stayed for six months write an article, while those who have stayed for six years don't write at all. Although he has deviated from these maxims by writing an article rather than a book, it can scarcely be said that he has done justice to his subject. On the strength of a stay of six weeks not even wholly devoted to visiting he has passed a sweeping condemnatory verdict (from which he exempts only open prisons and Borstals) on a foreign prison system comprising some fifty-five different institutions. In our view, no academic penologist, however eminent or experienced, is adequately equipped for such a task. Dr. Teeters informs us that, before his departure, he pledged himself that anything he would write 'would be evaluated against the backdrop of the serious problems' confronting the prison administration of this country, and there is no doubt that he sincerely believes he has kept his promise. It



is somewhat surprising, however, to read on the eleventh page, i.e. the last but one, of his article, the words: 'This paper is already too long to make more than a few statements about the boys' Borstals'. Can one do full justice to all the complicated issues involved on a bare eleven pages? Six weeks and eleven pages can, of course, easily provide an opportunity of noticing and criticizing a number of unsatisfactory features—there is probably no prison system in the world that would not easily lend itself to criticism,<sup>1</sup> and the English system does not pretend to be an exception. Professor Teeters' paper does not give one the impression, however, that he has successfully endeavoured to find out, first, whether those bad features are typical of the whole system or exceptional, and, secondly, whether they are due to faulty administration or the inevitable consequence of factors beyond the control of the Commissioners and openly deplored in their official reports year after year. He fails to see that where the available resources in men and material are utterly inadequate it may be reasonable to concentrate on those sections of the system where constructive work appears to be possible, neglecting those which under existing conditions are beyond repair. Dr. Teeters recognizes the potentialities of corrective training which was just beginning to emerge at the time of his visit, but it may be doubted whether he is aware of the strain which its sudden expansion has inevitably placed upon an already overworked system. He condemns the whole unconstructive atmosphere in the local prisons, but does he know that in 1948 24 per cent. of total receptions on conviction were on sentences not exceeding one month, and another 45 per cent. on sentences between one month and six months, which means that more than two-thirds of all convicted prisoners are there on sentences too short for any constructive treatment?

It is a pity that Dr. Teeters, when writing his paper, could not have before him the Report on Punishments in Prisons and Borstals, published in June, 1951. Sentences such as the following might have caused him to reconsider his verdict:

'There has been no attempt by the Prison Commissioners to minimize the evil consequences of overcrowding and under-staffing in prisons to-day. On the contrary they have drawn attention in their Annual Reports to the administrative difficulties of dealing with the increased prison population in buildings which are by any standard ludicrously inadequate, and admit that

<sup>1</sup> In the April (1951) number of a periodical very closely connected with Professor Teeters, *The Prison Journal*, we read, in an article headed 'Can Pennsylvania afford further delay in improving its correctional program', the following sentences: 'The worst impediment to orderly development is in the penal institutions. They are with few exceptions still operated on a custodial level which does not measure up to modern requirements. No reflection is implied here on the people who run these institutions. The crux of the problem lies in the fact that the basically punitive approach . . . is outmoded. . . .'



it is difficult under present conditions in local prisons to introduce any measure of prison reform' (paragraph 21).

'There is at present not only a shortage of staff but also an unduly high proportion of young inexperienced officers. This is a result of the war years, when the suspension of recruitment was followed by an unexpectedly rapid rise in the prison population' (paragraph 35).

'The ill-effects of the staff shortage are to be seen everywhere in the prison system. One of the most regrettable of these ill-effects is that it is impossible to secure that prisoners work for a full eight hours' (paragraph 43).

'There is a very serious shortage of whole-time medical officers in the Prison Service at the present time and the staff are often gravely overworked. . . . We feel obliged to emphasize most strongly that, unless the Prison Medical Service can offer conditions which will attract men of the requisite quality and can retain men of the necessary experience, prisoners will be deprived of one of the strongest protections against inappropriate punishment and treatment' (paragraph 95 [b]).

Some of these difficulties, it is true, are mentioned by Professor Teeters. What he fails to realize fully is their actual impact on the day-to-day administration of the system.

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Experience gained during the first year of publication has encouraged the Editorial Board to make some changes in the lay-out of this *Journal*. The section dealing with 'Current Research' has up to now been confined to compiling a calendar of existing or projected researches. This the Editors propose to continue, and they trust that readers will keep them informed of any research work coming to their notice. It seems desirable, however, to include in this section notes on methodology which may be of service to research students. The section will in future be headed '*Research and Methodology*'. It is also intended to amplify the general section dealing with matters of current interest, reports, changes in legislation and the like by publishing from time to time critical commentaries on the more important issues arising from these 'Notes'. This section will in future be entitled '*Notes and Criticisms*'. It is hoped in this way to increase the scientific value of the *Journal*. Readers are likewise invited to keep the Editorial Board informed of matters of interest arising in their area.



# PSYCHOPATHIC STATES

By SIR DAVID HENDERSON (EDINBURGH)

When the Editorial Board asked me to write a short Introduction to the following series of articles dealing with Psychopathic States, I agreed readily enough because it is my firm opinion that our profession should have a very much clearer appreciation of the part which the concept of the psychopathic personality plays in psychiatric and social work. Some of us have no doubt of its significance; others refer to it in a lighthearted and casual manner; and there are others still who pooh-pooh the position and assert that the psychopathic state is so impossible to define, it is not worth while bothering about. The more consideration, however, which I give to this problem the more certain I become that it is the delimitation and understanding of the psychopathic state, or personality, which influences our attitude not only in regard to those states as such, but also in relation to many psycho-neurotic and psychotic states which so frequently take a different course from the one we might reasonably expect. It is lack of appreciation and understanding of this factor which has often led to a great deal of prolonged, useless, faulty, and even dangerous treatment.

I believe that the Psychopathic State can be defined, that it can be worked with, and that it forms a part of our psychiatric hierarchy just as clearly and as fully as any other of the psychoneurotic and psychiatric states which we accept so readily. I believe it should be more fully appreciated that the psychopathic state presents a malignant undercore which involves people irrespective of their social and material advantages. Such persons exhibit behaviour and emotional disorders of extreme virulence due maybe to a lack in their inherent structure or constitution. Just as people are unable to develop intellectually and remain, for all practical purposes, throughout their lives at a sub-normal level, so there are those others whose emotional development is either non-existent, or at least so limited, that they lag behind their intellectual development. We are in the habit of describing them as essentially immature and as behaving in a thoughtless, callous manner, so that the moral values fail to reach that state of maturity which enables the individual to fit into social life. It is of little or no value to attempt to decide whether such persons are of sound or of unsound mind. Sanity and insanity are merely legal terms, and what we are concerned with is the problem of maladjustment and adaptation so as to inculcate or develop a sense of social responsibility.

The more I see of such case material the more I have come to appreciate that such states constitute not only important psychiatric entities but are



medico-social problems of which there should be far greater understanding, both by the lay public and the medical profession.

(A) From the psychiatric angle, the conspicuous feature which presents itself is the incongruity which exists between the ability to co-operate in a complete examination, to talk in a coherent manner, in some cases to have a certain degree of insight into their problems, and yet at the same time to show an almost complete lack of control of behaviour, so that acts of a foolish senseless and thoughtless nature are repeatedly perpetrated. This type of behaviour disorder and lack of appreciation of the real values of life is demonstrated day by day by a group of young persons, male and female, who have never learned to control their instincts and impulses and who, from an early age, have constituted a problem to themselves, to their parents, and to society. It is true to state that in the vast majority of such cases psychological and physical examinations fail to demonstrate ætiological factors which can be regarded as of any specific importance. There are, of course, instances in which such conduct disorder develops as a result of a variety of extraneous circumstances, e.g. lack of nutrition, lack of sleep, epidemic encephalitis, and so on, but apart from such highly specialized instances the vast majority of cases demonstrate no specific ætiological factors. In consequence we are forced to think seriously of the possible genetic developmental anomaly which may be the determining factor.

(B) Socially everyone knows that the persons who form this group constitute a very serious problem. The reason is that neither Medicine nor the Law nor our social organization has been able to make adequate provision for them. In our daily work in the ordinary mental hospital such persons are a source of constant trouble and anxiety. They disturb the other patients, they upset the nursing and medical staff, and they lead a selfish, individualistic existence which brings them into conflict with their fellow patients.

The Prison system, so far, has done little or nothing to assist and it is indeed this particular class of person who swells the prison population and forms a large proportion of the in-and-out group. Furthermore, in their ordinary lives they are unable to adapt to the work conditions provided for them and fail to co-operate or to show any sense of loyalty to the organization in which they may be working. That is why they constantly change their jobs; they are so lacking in stability that they become easily dissatisfied, and the more strict organization of Service life, with its rigid discipline, fails, in these cases, to effect its purpose. These also are the disaffected work people who are inclined to be agitators and stirrers-up of trouble and constitute the wastage turnover in any industrial organization.

It is indeed easy to see how important it is to have a clearer idea in rela-



tion to the difficulties which patients of this type exhibit, and how a more understanding outlook should be developed towards them.

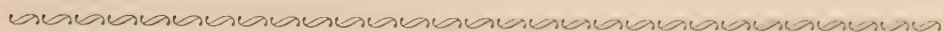
(C) From the therapeutic side we require to admit that we have not, as yet, developed any adequate methods whereby we can deal satisfactorily with such cases. It seems clear, however, that those who constantly involve themselves in difficulty in their home, in their school, or in the work-shop, are people who require very sympathetic and understanding consideration, because they are the victims of some factor in their constitutional make-up which they have been unable to control or deal with. We must not allow ourselves to throw up our hands in holy horror and say that we can do nothing about it, but we must intensify our efforts and must strive to find ways and means of doing better than has been the case previously.

It may be that the Criminal Justice Act which has been recently introduced will help us by enlisting the co-operation of our Courts whereby they will be more willing to utilize the help of psychiatric specialists to deal with a certain proportion of such cases. In addition, with the help of Psychiatric Social Workers and Probation Officers we should be able to keep more in touch with such persons, and in that way influence them to a greater extent. It seems obvious, however, that either in association with our Prison system, or as a special organization, a form of Institution or Colony care should be built up in which such patients could be employed economically and where sufficient time will be available to effect an improvement. The time factor and experience are the essential therapeutic agencies. I am more or less convinced that an intensive psychoanalytic approach is very disappointing. The psychopath seems merely to incorporate the analytic aspect into his psychopathy, regards it as something which differentiates him still further from his fellows, and exaggerates his distorted sense of prestige. The fact, however, that it is recognized that he has a sick soul, and that he is in need of moral and spiritual vitamins is again an important therapeutic asset.

(D) The question of the criminal responsibility of persons afflicted in this way is one of the most difficult and controversial matters which confront us. The Courts are still inclined to be dominated by the concept of reason and free-will and have never appreciated sufficiently that conduct disorder is determined at an instinctive or sub-conscious level. I feel sure that the doctrine of partial responsibility, as was laid down by Lord Alness in the Scottish Courts a few years ago, in which he stressed the fact that there were conditions of mind which did not amount to complete unsoundness but which showed a degree of instability, due probably to special circumstances, which would merit a mitigation of the guilt of the accused, is one which commands our deepest respect. It, of course, is limited in its application because it is used only in murder cases, whereby the verdict may be

changed from one of murder to culpable homicide, but there seems no reason why the same consideration should not be vouchsafed to those persons who may have committed what appear to be less serious offences. \*

I would plead, strongly, that all these matters which I have touched on should receive far greater consideration and far more thought than has ever been accorded to them, and that we should strive more and more to grasp the grave danger of this seriously disordered group of medico-social cases.



... This naturally raises the question of the relative importance of environment and inheritance. It is important to realize at the outset that there can be no clear-cut answer to this question if posed in general terms. The relative proportion of inherited and environmental influences on a given trait is not constant but varies in groups of animals according to (1) the genetic variability within the sample and (2) the range of environmental differences superimposed on the animals. Thus inheritance will account for the greatest part of the total variation if the genetic variability is high but the environment is similar for all animals. On the other hand, environment becomes the greatest source of variation if the genetic variability is low, but the environment of each animal varies widely. An answer to the question, 'Which is more important, nature or nurture?' has therefore no meaning unless the population and the environment in which each animal lives, are clearly defined. ...

JOHN HANCOCK: 'Identical Twins in Dairy Cattle Improvement Investigations'.

(London: Penguin Books, Science News 21, 1951, p. 50)

I have heard schoolmasters talk as if they alone were responsible for their pupils' lives. They are not. Only parents are responsible. It is an unfortunate fact that much of a schoolmaster's work consists in rectifying or in trying to rectify the mistakes, and in supplying the omissions, of parents; yet even so the bad parent is more powerful than the good schoolmaster.

AUBREY DE SELINCOURT: 'The Schoolmaster'.  
(John Lehmann Ltd.)



## DEVELOPMENTS IN THE CONCEPT OF PSYCHOPATHIC PERSONALITY (1900-1950)

By MILTON GURVITZ (NEW YORK)

The literature on psychopathy up to 1900 has been summarized in a scholarly and exhaustive article by Maughs. The author concludes:—

. . . until 1900 the approach to the subject of moral insanity was very limited. Very few papers were devoted to its ætiology and hardly any to its psychology. Opinion was widely divided as to whether it should be classified as a separate type of insanity or as a subtype or a stage in all mental illness. Confusion continued to reign over Prichard's concept of moral insanity and many alienists gave their own interpretations of Prichard's views, each quite diverse. The two schools of thought supporting the existence of moral insanity as an entity were the anthropological and the philosophical, the latter basing their contentions on the presence of a separate moral sense which was diseased. Within the ranks of the supporters there was much disagreement as to the involvement of the intellect as well as the origins and location of the moral sense. Those who denied the existence of moral insanity were also in disagreement. Some could not accept a division of the mind into its moral and intellectual spheres while others claimed that the intellect was always affected in mental illness and, as a result, all insanity was intellectual. A smaller group, loud in their protestations, and prolific in their writing, opposed its existence on the basis of consequences (effect on man's morality) (44).

The term 'psychopathic inferiority' appears to have originated with Koch in 1888. Koch's conception was very broad, including under the term certain peculiarities and eccentric forms of behaviour together with a number of states that would now be called neuroses (31).

Naecke, writing in 1906, proposed the term moral idiocy rather than insanity since the symptoms indicated defect rather than aberration. He contended that they showed defects in spheres other than the ethical. His most important point was that to understand moral idiocy it was essential to recognize the dissociation between the moral and the intellectual faculties which usually developed simultaneously (44).

Meyer (1912) took the extremely important step of excluding the neuroses from this classification; he felt moreover that the remaining 'true psychopathies' had their primary origin in constitutional inferiorities (46). Kraepelin included psychopathic personality in his descriptive studies and attempted to differentiate psychopaths into seven types: the excitable, the unstable, the impulsive, the eccentric, the antisocial, the quarrelsome, and the liars and swindlers.

Steen, in 1913, classified moral insanity into the congenital and acquired forms; moral insanity to him represented the acquired form of the syndrome, and moral defect the congenital absence of a moral centre in the brain (62).

Birnbaum, in 1914, made an outstanding study of the psychopathic criminal. To him, the hall-mark of psychopathy was its pathological affectivity. The feeble-minded and the psychopaths were not mutually exclusive in his system, since the feeble-minded could have psychopathic traits, and the psychopath could have an under-developed intelligence. Birnbaum delineated and evaluated the various traits of character of the psychopathic personality and discussed them on the descriptive level. He was the first to emphasize that we could not identify the psychopath with the criminal and that criminal behaviour is not the primary manifestation of the psychopath; neither are they all morally defective<sup>1</sup> (7).

Mercier (1917) laid claim to having invented the term 'moral imbecile' for the British Mental Deficiency Act of 1913 and to having formulated the definition:

Persons who from an early age display some permanent mental defect coupled with strongly vicious or criminal propensities on which punishment has had little or no deterrent effect (45).

He chose the term 'moral imbecile' to differentiate it from moral insanity in which a similar defect might appear.

Tredgold (1917) disagreed with this definition. He recognized two kinds of moral imbecility: (i) primary—due to a congenital absence of the ability to acquire a moral sense; and (ii) secondary—lack of moral sense resulting from improper training. The latter type always implied a defect of will. He postulated a late development of the moral sense and the possibility of its arrest without intellectual defect. The outstanding behaviouristic manifestation was the invariable absence of any shame or remorse (65).

The scientific descriptive evaluation of the criminal psychopath was continued by Bernard Glueck (1918). For the first time he was able to validate some of the diagnostic criteria by a statistical investigation of 608 prisoners at Sing Sing. His figures have held up remarkably well to the present day. The study demonstrated that 18.9 per cent. of the group were psychopaths, almost entirely native born, and with the highest rate of recidivism. The psychopathic group showed a distinct tendency toward

<sup>1</sup> Birnbaum drew a distinction between 'thymopathically antisocial' psychopaths, who are only casually in conflict with society, and psychopaths antisocial in their structure. Impulsive or excitable individuals, fanatics, querulants, hypomaniaes, depressives and neurasthenics belong to the first category; pathological liars and swindlers, degenerated hysterics, unstable individuals, morphinists and the morally insane belong to the second; sexual perverts occupy the intermediate position. (Ed.)



habituation to alcohol, drugs, and excessive gambling. Over 85 per cent. exhibited psychopathic behaviour in early life, while over 75 per cent. had serious difficulties during their school career. Glueck claimed that in every case there was a marked absence of ideas of sex morality. In nearly all cases the occupational record was found to be irregular and inefficient (20).

Sandoz (1919) in an investigation of delinquent girls, came to the conclusion that the disorder must be due to bad heredity. On a descriptive level, however, she confirmed a similarity of their behaviour to that of males. Psychopathic girls were characterized from early childhood by stubborn, deceitful, saucy, troublesome, slack behaviour; their delinquencies invariably beginning before the age of ten (57).

A milestone in the careful clinical investigation of psychopaths is Visher's study of fifty cases from a Veteran's hospital shortly after the First World War (1922). Visher came to the conclusion that the psychopath suffered from a defect in volition with resultant difficulties in concentration and an inability to hold to one course of action long enough to succeed. Poor inhibitory qualities make him prone to commit crimes of passion and sexual excesses of all kinds. His egotism, boldness, leadership in gangs, and social nihilism were explainable through the mechanism of overcompensation. Projective mechanisms resulted in irritability, a tendency to blame others for his troubles, and a feeling that the law and authority were unjust. Inadequacies were subconsciously dominant. His emotional instability and impulsiveness lead to conflict with his environment and society and to the development of eccentric ideas. Non-conformity to social and ethical standards, while due in part to the foregoing, was mainly the result of a tendency to follow the line of least resistance. The psychopath does not profit by experience, despite the outward and objective ability to do so, and follows his own inclinations without regard to consequences to himself or to others. Visher particularly noted that military life provided a sublimation for the psychopath's marked *Wanderlust* (67).

Thom and Singer (1922) suggested that the essence of the defect lay in the psychopath's inability to use his intelligence to guide his behaviour. Psychopaths perform all sorts of ill-considered acts to gratify immediate desires even though when questioned they readily admit that the acts are ill-advised. They are further described as plausible, superficially shrewd, incapable of steady application and without tenacity of purpose (64).

Karpman, in a series of studies extending from the early 1920's to the present day, has consistently maintained that psychopathy, or, to use his expression, anethopathy, is a narrow conception and excludes anyone whose difficulties result from psychogenic causes. The main emphasis is on the utter selfishness of these individuals who are heartless, conscienceless,

unprincipled, and without any sense of guilt. Crude gratification of instincts and an inability to form emotional attachments to others are essential concomitants. Psychopaths exhibit a combination of hypersexuality with a strong homosexual component. Despite their intellectual capacity, they are unable to foresee the consequences of their acts since their primitive emotional organization presses for immediate release (27, 28).

Noyes explains the behaviour of the psychopath as an expression of unconscious conflict. A contrast is made between the neurotic who expresses his conflict symptomatically, and the psychopath who expresses his 'through stereotyped irrational, and socially inept or hostile behaviour,' the symptom often appearing in the neurotic as a moral scruple, appears in the psychopath as a moral defect (44).

Although Kahn's book, 'Psychopathic Personalities' (1931) has been highly praised, the author's point of view is undisciplined and despite claims to the contrary has had little real influence on current thinking on the subject. Kahn includes under psychopathic personalities all mental disorders between the psychoses and the normal. This sweeping classification runs counter to the differentiations effected at the beginning of the century, and no serious practitioner would attempt to diagnose on this basis to-day. He approaches the problem from a biogenic, philosophical, and psychological point of view, which is heavily saturated with mysticism; and his ætiology is rooted in mysterious *Anlagen*. A completely useless typology of sixteen classifications is used and the author postulates that psychopaths vary in accordance with quantitative peculiarities in impulse, temperament, and character.<sup>2</sup> The case histories comprise classical examples of hysteria, and obsessional neuroses as well as mild schizophrenias, rather than characteristic types of psychopathy such as American investigators were beginning to etch out in the 1920's (26).

A simpler, although essentially similar typology was developed by Kurt Schneider (1934). His definition of psychopathy is, however, rather practical, while that of Kahn was theoretical: he emphasises conflict of the individual with society and its social consequences rather than internal disharmony of personality structure and ætiology of the disorder: 'Psychopathic personalities', says Schneider, 'are those abnormal personalities who suffer from their abnormality or produce suffering in their environment' (58).

Henderson (1939), whose concepts are more restricted, gives us a clear working definition:

<sup>2</sup> Kahn gives the following definition: 'By psychopathic personalities we understand those discordant personalities which, on the causal side, are characterized by quantitative peculiarities in the impulse, temperament and character strata and in their unified goal-striving activity are impaired by quantitative deviations in the ego and foreign variations'.



Psychopathic state is the name we apply to those individuals who conform to a certain intellectual standard, sometimes high, sometimes approaching the realm of defect but not yet amounting to it, who throughout their lives, or from a comparatively early age, have exhibited disorders of conduct of an anti-social or asocial nature, usually of recurrent or episodic type, which, in many instances, have proved difficult to influence by methods of social, penal and medical care. . . . The failure to adjust to ordinary social life is not a mere wilfulness or badness which can be threatened or thrashed out . . . but constitutes a true illness (23).

Henderson was inclined to impute much of the causation of psychopathy to the interaction of hereditary and environmental factors. A more revolutionary sociological point of view is presented by Partridge (1930). He described the clinical manifestations of psychopathy as being either neurotic in nature or strongly infantile. He concludes that:

. . . the psychopath is one in whom strong demands are accompanied by feelings of inadequacy, inferiority, or insecurity and in whom there develops a tendency to resort to one or more typical reaction patterns, different in many cases, but all to be included in a general way under the terms tantrums, sulks, and running away (49).

A composite picture of psychopathy as described by Partridge would show the prevalence of aggressive attitudes toward parents, sensitiveness, restlessness, marked social difficulties, lying, stealing, and other evidence of insecurity. He described psychopathy as a protection against some forms of mental illness. He rejected the clinical concept of psychopathy, substituting the term 'sociopathy' to designate a deviation in social relations whether it be with individuals or groups (49).

Alexander (1930) using the term 'neurotic character' attempted to fit the psychopath into a Freudian classification.<sup>3</sup> It is to be noted that he did not call it a 'character neurosis' which is a much more inclusive term. As we can see from his description, neurotic characters are psychopaths:

. . . they live out their impulses, many of their tendencies are asocial and foreign to the ego. . . . Neurotic characters succeed in actualizing their world of phantasy, despite the fact that most of them by so doing bring disaster upon themselves. . . . I do refer to those individuals whose lives are full of dramatic action, to whom something is always happening as if they were driven by the demoniac compulsion which Freud metaphorically imputed to them. . . . Here is where the adventurers belong whose manifold activities give expression to an underlying revolt against public authority. . . . Dimitri

<sup>3</sup> Already in 1925 Aichhorn ('Wayward Youth') had described the application of psycho-analytic principles to the treatment of young, violent offenders. Although his classification was limited to types respectively with and without neurotic formations and although he did not use the term psychopathy, many of his cases would have been diagnosed as classical psychopaths. See *Critical Notice*, p. 167. (Ed.)

(in 'The Brothers Karamazov') is not a neurotic character, but *the* neurotic character, in whom every conceivable dichotomy, good and evil, sadism and masochism, mawkish sentimentality and arrogant licentiousness, heroism and pusillanimity find wildly co-ordinated expression (2).

Of the three characteristics of neurosis, two are absent in neurotic characters: (i) there is no substitutive gratification and (ii) unlike the neurotic the neurotic character's instinctual gratification is on an alloplastic plane.<sup>4</sup> Conflict does exist in the neurotic character, as is shown by the punishing effect of the super-ego on the ego. In these cases tendencies stream into the ego and permeate it so that they influence the total behaviour of the individual, sometimes to such an extent that *conscious* conflict and insight are absent. The symptoms of the neurotic character are characterized by: (a) regression, (b) alloplastism, (c) acceptance of latent content by the ego although some modification is allowable (such as State being a substitute for father), together with a self-injuring component.

If only regression occurred, pure criminality would result since there would be no inner conflict. Regression is deepest in the psychoses for it is a 'biological regression of the total organism'.

The essential characteristic of the neurotic character is the great expanding power of tendencies alien to the ego. The strength of the ego is obviously less than among neurotics, not on account of its absolute weakness, but owing to the overwhelming power of the id impulses. The expansive 'living out' of impulses is the differential point which delimits the neurotic character; unquestionably there is a specific constitutional factor which is primarily responsible for an alloplastic instinct gratification and which also brings him closer to a healthy person. In neurotic characters the eternal struggle between man and society is exemplified not in elusive intra-psychic processes, but in the visible drama of their own lives.

The whole process may be clarified by reference to the symptom of hatred of the father. In the normal individual this takes the form of emancipation from the family, in the hysteric it is manifested as a phobic fear of instruments or situations which might tempt him to do injury to his father. The obsessional neurosis regresses even further, giving rise to obsessions of the father's death or injury; while in a complete regression in a psychosis the symptom is death of the father. In the neurotic character, on the other hand, it is characterized by defiance and conflict with figures representing authority (2).

Wittels (1937) explains psychopathy from the Freudian point of view in

<sup>4</sup> By alloplastic adaptation is implied the discharge of instinctual tension through the induction of changes in the environment. In autoplasic adaptation the changes are induced in the individual's own body or mind. (Ed.)



yet another way. He postulates that the psychopath is fixated on the protophallic state—the primary stage of genitality in which sex is not differentiated and there is no castration fear. Such an individual has an underdeveloped super-ego and is spared neurotic anxiety. He is impulsive, restrained only by outer powers, and can comprehend outer immediate dangers, but lacks conscience. He would be completely narcissistic were it not for the bisexual phallic activities which suggest the existence of object libido. The psychopath develops only a surrogate for the super-ego; the conflicts most people solve in infancy pursue him into adult life. He is both bisexual and masculine, brutal, fearless, and troubleseeking. He will lie, cheat, steal and deceive with no compunction or guilt (71).

Cleckley (1941), who manages to combine the Freudian and the psycho-biological point of view, considers that the psychopath's failure to make an adjustment to life is due to his inability to grasp emotionally any of the ordinary components of meaning or feeling implicit in the thoughts which he expresses or the experiences he appears to go through. The psychopath with his semantic dementia, is analogous to the patient suffering from semantic aphasia, and goes through only the outer manifestations of functioning; but his words and sentences, and all of his productions are empty of emotional meaning (13). There is a selective and far-reaching dissociation involving primarily emotion and more indirectly purpose, which, unlike the circumscribed dissociation of hysteria, extends throughout all the range of experience and alters the reaction of the total personality; its proper nosological definition is 'semantic dementia'. Cleckley considers that this is due to conflicts unsatisfactorily resolved by the mechanisms of adjustment. While he states that a psycho-biological or psycho-dynamic concept is most useful in considering aetiology, he is unable to single out any one conflict or fixation. The main value of his works, particularly of 'The Mask of Sanity', lies in the brilliantly written and sharply delineated case histories. Even so he states,

. . . The deeper levels of the personality in such patients are difficult to investigate because of their inability to achieve a transference reaction and their lack of real sincerity and co-operation.

The view of a substantial minority of clinicians is represented by Preu (1944), who, while recognizing psychopathic behaviour, still regards it as a waste-basket classification with no real claim to a nosological status. He states:

The term 'psychopathic personality' as commonly understood, is useless in psychiatric research. It is a diagnosis of convenience arrived at by a process of exclusion. It does not refer to a specific behavioral entity. It

serves as a scrap-basket to which is relegated a group of otherwise unclassified personality disorders and problems (50).

Curran (1943) summed up the majority point of view in the 'clinical description of psychopaths as follows:

Patient must have shown a definite history of at least five to six years' duration of either marked emotional disturbances, impulse disturbances (partly sexual) or characterological disturbances—anti-social behaviour on basis of lack of conscience as characterized by chronic pattern of delinquency. . . . Such individuals are those who not only lack ordinary feelings of guilt or remorse but show very little capacity for making deep emotional contact with others, such as parents or parent-substitutes. . . . Adolescents should not be considered as psychopathic whose delinquency began only at puberty (32).

Cason (1946-48) is another investigator who has come in very wide contact with this disorder through his work with the U.S. Public Health Service in Federal Prisons. It is his contention that the psychopath is a person who cannot control his primitive modes of behaviour because he has not yet learned to do so, and that unlike other psychiatric conditions, psychopathic personality is unlearned rather than aberrantly learned behaviour (10). Apart from this, his most valuable contribution is a descriptive statistical paper on 500 successive admissions to the psychopathic unit at the Medical Center for Federal Prisoners at Springfield, Missouri. Cason has shown that the psychopath is young: 73 per cent. were under thirty years of age, and only 1 per cent. over fifty. He tends to be white, of native birth, and either not married, or living in a common law relationship, separating or divorcing. Educationally, psychopaths are well below average, and they tend to be employed in unskilled or illegal occupations. The usual offence is stealing cars. Psychopaths usually have a long delinquent record since they serve heavy sentences; 81 per cent. are known recidivists. Only 35 per cent. came from a home that was not broken before the age of eighteen. Intelligence of the group was normally distributed. Physically, psychopaths were in a better condition than a representative group presenting themselves before a draft board (11).

From the standpoint of individual psychology, Dreikurs (1945) emphasizes that in the past differentiation of mental disorders on a symptomatic basis led to the classical division into neurosis, psychosis, and psychopathic personality. The differences are not simply those of degree, 'The conflicts in each case are solved in a different way' (16).

All conflicts of any human being, Dreikurs asserts, are social conflicts resulting from a disturbance or straining of the social relationship of the individual, impairing his integration into the community and obstructing



his participation in the social functions. These restrictions are not uniform. Adler's concepts, says this authority, made possible a differentiation of a 'private sense' from a 'common sense'. By common sense 'we understand our thinking in common, our participation in general ideas, in values and morals accepted by the whole group to which we belong'. 'Private sense' is an individual's 'goals, his life styles, his interpretation of his own needs which interfere with his willingness to bring himself to live with his social demands, with evolution (sic.)'.

The psychopath, continues Dreikurs, has no inner conflict. He fails to develop sufficient common sense. He denies the logic of others; never accepts their values and morals. He needs no alibis and deliberately flaunts his interests and his tendencies. There is a complete inability to conceive of the moral standards and values of the group. In general, this is due to deficiencies in upbringing, namely, lack of supervision and educational facilities, or lack of ability on the part of parents or teachers. Neither punishment nor indulgence has any therapeutic effect. The only successful type of therapy is group therapy, since the psychopath needs to develop a 'common sense'.

Lauretta Bender (1946), on the other hand, believes that psychopathic children are characterized by diffuse, unpatterned, impulsive behaviour in which the individual is driven by inner impulses which demand immediate satisfaction. Despite variation in the level of infantile fixation this is in all cases pre-œdipal, pre-super-ego, and invariably pre-narcissistic. The oral and anal behaviour of such children are not regressive neurotic traits but are due to retardation in personality development. There is no affect in the attachment to others and, despite bids for attention and general personal attractiveness, they can stand neither disappointment nor separation. There is also a lack of anxiety and an inability to feel guilt. At first there is a general language deficiency which resolves itself into a state of semantic dementia (6). There are definite mood swings which appear to be related to physiological rather than psychological motivation. The psychopath is capable of closely imitating the behaviour of others of his own age. This, however, is purely mimetic and has no relationship to real meaning or experience, partaking rather of the nature of confabulations, ridicule, and caricature.

Bender considers that psychopathy cannot be modified by analytic therapy, transference therapy or a change of 'climate' since the psychopath can have no emotional feeling towards anyone. 'These children do not remember the past, they cannot benefit from past mistakes; consequently they have no future goals and cannot be motivated to control their behaviour for future gains'.

The cause of the condition, according to Bender, is emotional deprivation

during the infantile period due to lack of, or serious break in, parent-child relationships. The defect lies in the inability of the children to form relationships and to identify themselves with others. This causes a defect in conceptualization of intellectual, emotional and social problems and of asocial or unsocial behaviour. The developmental process in the personality becomes fixed at the earliest stage; no satisfactions are derived from life-contacts; no anxieties arise because there are no conflicts. The ego is defective and there is no super-ego. There are thus two different causative factors; one is the absence or inadequacy of emotional, social, or cultural stimuli which is a part of the institutional life of children and which is related to their intellectual retardation, apathy and lack of patterned behaviour; the other factor is the absence of, or critical or repetitive breaks in, an identifying, close adult relationship.<sup>5</sup>

Commenting on this point of view, Wechsler (1947) maintained that it was in reality an extension of the doctrine of heredity. Previously, argues Wechsler, we have believed that whatever an individual has learned after birth can be modified or corrected. What Bender has done is extend for another year or two after birth the period when changes in the personality of the individual remain unmodifiable.

Lindner (1944, 1946), too, believes that psychopaths are characterized by an inability to await the normal satisfaction of their intimate needs. Psychopathic super-egos are stunted and immature owing to the failure to introject the father image and the prohibitions of society, with a resultant fear of castration and hatred of father surrogates (38). The ego has never crystallized to a point where it is capable of mature self-regard and is permeated by id urgings with the result that the psychopath *knows* the difference between right and wrong but cannot *feel* the difference (39). The psychopath's sex life is chaotic, non-selective and adventitious. His egoism is strong and assertive because his psychosexual history has been halted in the megalomaniac stage of infancy, thus enabling him to exploit his environment ruthlessly (39).

Lindner's experiments with the response of psychopaths on the photopolygraph lead him to the conclusion that psychopaths are more arrhythmic physiologically than normal individuals, and that this was the foundation of

<sup>5</sup> A similar idea was developed at about the same time in Great Britain by John Bowlby (1944) whose investigation into the social background of juvenile thieves established a close relationship between 'the affectionless character' and a prolonged separation from the mother in the early years. Another British investigator, Kate Friedlander (1947), whose clinical work at the Institute for the Scientific Treatment of Delinquency was conducted according to psycho-analytic principles, links the formation of psychopathic personality (termed by her 'antisocial character structure') with love deprivation in early childhood. (Ed.)



their instability. His other conclusion was that psychopaths are more sensitive and delicately poised than normals (36).

Lindner has further postulated that the concept of homeostasis is an aid to understanding psychopathic behaviour. The conflict between libidinal needs and social prohibitions engenders tensions which the psychopath is unable to control. To prevent disintegration and restore balance the aggression is released in explosive, asocial acts. Thus the emotional response of the psychopath to his behaviour is absent since it produces internal peace instead of conflict (40).

From an analytic point of view, Lindner asserted that the psychopath gives vent to a strong need for punishment and that this is the main motivation for his commission of crimes free from acquisitional motives, the marrying of prostitutes, and promiscuity in women (39).

The concatenation of crucial events which conspires to produce the psychopath when it is exerted on a predisposed physiology makes the psychopath what he is—'the grown up child of the pleasure principle' (39).

There is a considerable body of evidence, the most striking of which has been presented by Silverman (1943), that the brain-wave patterning of psychopaths on the electroencephalograph is of a recognizably different order from similar tracings from other groups (60). Hodge (1945) concludes:

It is suggested that in impulsive and aggressive psychopaths we are observing a condition where the normal establishment of cortico-thalamic patterns of association is arrested at the age in childhood corresponding to the end of latency and the beginning of the homosexual period (24).

Knott and Gottlieb (1944) find an abnormal electroencephalogram characterized by abnormally slow and very slow waves.<sup>6</sup> (30).

At the Second Criminological Congress at Paris, Glover (1950) advanced the view that although the term psychopathy was comprehensive in the sense that the term schizophrenia is comprehensive, and although it had sometimes

<sup>6</sup> In Great Britain, Hill and Waterson (1942) have found such abnormal waves in 65 per cent. of aggressive psychopaths and 48 per cent. of the total group of 151 psychopaths. Nevertheless Hill, when giving evidence before the Royal Commission on Capital Punishment (1950) was very cautious in his conclusions: '... In the E.E.G. we are dealing with an electrical phenomenon, whereas psychopathic personality is a psychological phenomenon. The two are associated, and the electrical phenomena occur commonly in people who have psychopathic personality. That is as far as I can go.' When analysing the E.E.G. results of men accused of murder, Hill and Taylor found that only a minority of men accused of 'incidental killing' and 'clearly motivated murder' had abnormal E.E.G., the proportion of 'normal' to 'abnormal' E.E.G. being 13 : 4 and 22 : 6 respectively; in cases of 'apparently motiveless murder', of 'sex murder' and of 'insanity', the proportion was, however, reversed, being 4 : 14, 4 : 5, and 7 : 15 respectively. Other British investigators who have found abnormal E.E.G. common among psychopaths are Williams (1941), Hill (1944, 1945), Hill and Sargent (1943), Heppenstall, Hill and Slater (1945) and Stafford-Clark and Taylor (1950). (Ed.)

been unwarrantably extended to include a number of disorders not strictly psychopathic in type, the comprehensiveness of the term was not in itself any objection to its use. Psychopathy was an 'omnibus group'; a more thorough employment of the dynamic standards of unconscious psychology and a more thorough investigation of the ætiology of different clinical types of psychopathy would lead to a better definition of the whole group and of its many possible sub-divisions. Up to the present time the most clearly distinguished psychopathic type was that originally described by Prichard; but this was only one of many possible psychopathic syndromes. He criticised the term 'constitutional psychopathy' on the ground that it discounted the vital factor of faulty development of the unconscious ego and of reality sense. He did not share the general tendency to form a pessimistic prognosis for psychopathic states, which frequently resolved spontaneously in middle age. Although the classical technique of psycho-analysis was too rigid for the treatment of psychopathy, a sufficiently elastic application of psycho-analytical *principles* could provide a suitable therapeutic method applicable to both individual and social aspects of the problem. Given sufficient patience, absence of negative counter-transferences to the patients' recidivism and an extensive modification of their transferences through the simultaneous application of a number of supporting personal contacts over a long enough period, a significant number of favourable results could be obtained under ambulant (non-institutional) conditions, almost as favourable as those obtained in the case of psycho-neurotic delinquency.

#### SUMMARY AND CONCLUSIONS

The history of psychopathy began with the concept of moral insanity, and included in its inception most of the mental disorders except the psychoses. Even as late as 1930, however, Kahn still included the neuroses in the term, although this has been entirely rejected in practice. Some writers still maintain that psychopathy is due to a hereditary lack of ability to acquire moral values. In general, we have progressed from the point of view existing prior to the First World War that the psychopath is a biologically inferior type to the recognition that it is the psychological make-up which is aberrant. Clinical descriptions have been greatly clarified, although conflict as to ætiology still rages. Some writers still claim that there is no such entity as psychopathic personality and point to the looseness of the diagnosis in practice; others, while recognizing difficulties in definition and wide variations in the clinical picture, accept psychopathy as a useful category characterized by specific dynamic features, and advance research into the ætiology and prevention of that disorder.



## BIBLIOGRAPHY

- (1) AITA, J., *et al.* 'Use of the Wechsler-Bellevue Test with Brain Injured Cases', *Journal of General Psychology*, 1947, **25**, 25-44.
- (2) ALEXANDER, F. 'The Neurotic Character', *International Journal of Psycho-Analysis*, 1930, **11**, 292-313.
- (3) ALLEN, R. 'The Test Performance of the Brain Injured', *Journal of Clinical Psychology*, 1947, **3**, 225-30.
- (4) ARMITAGE, S. 'Analysis of Tests Used to Evaluate Brain Injury', *Psychological Monographs*, 1946, **60**, 1-47.
- (5) BALINSKY, B. 'An Analysis of the Mental Factors of Various Age Groups from 9 to 60', *Genetic Psychology Monographs*, 1941, **23**, 191-234.
- (6) BENDER, L. 'Psychopathic Behavior Disorders in Children', in 'Handbook of Correctional Psychology'. New York: The Philosophical Library, 1946, pp. 263.
- (7) BIRNBAUM, K. 'The Psychopathic Criminal', *Journal of Nervous and Mental Diseases*, 1917, **2**, 543-53.
- (8) BOEHM, A., and SARASON, S. 'Deterioration Indices in Mental Deficiency', *Journal of Abnormal and Social Psychology*, 1947, **42**, 351-9.
- (9) BROWN, J. F. 'The Psychodynamics of Abnormal Behavior.' New York: McGraw Hill, 1940.
- (10) CASON, H. 'The Concept of the Psychopath', *American Journal of Orthopsychiatry*, 1948, **18**, 297-308.
- (11) CASON, H. 'Five Hundred Psychopathic Prisoners', *Public Health Reports*, 1946, **61**, 557-74.
- (12) CLARK, J. 'Intelligence Test Results Obtained from a Specific Type of Army AWOL', *Educational and Psychological Measurements*, 1948, **8**, 677-82.
- (13) CLECKLEY, H. 'The Mask of Sanity.' St. Louis: The C. V. Mosby Company, 1941.
- (14) CLEVELAND, S., and DYSINGER, D. 'Mental Deterioration in Senile Psychoses', *Journal of Abnormal and Social Psychology*, 1944, **37**, 360-8.
- (15) CURRAN, D., and MALLINSON, D. 'Psychopathic Personality', *Journal of Mental Science*, 1944, **90**, 266-86.
- (16) DREIKURS, R. 'Psychological Differentiation of Psychopathological Disorders', *Individual Psychology Bulletin*, 1945, **4**, 35-48.
- (17) FRANKLIN, J. 'Discriminative Value and Patterns of the Wechsler-Bellevue Scale in the Examination of Delinquent Negro Boys', *Educational and Psychological Measurements*, 1945, **5**, 71-85.
- (18) GARFIELD, S. 'Wechsler-Bellevue Scatter Patterns in Schizophrenics', *Journal of Consulting Psychology*, 1948, **12**, 32-6.
- (19) GILLILAND, A., *et al.* 'Patterns and Scatter of Mental Ability in Various Psychoses', *Journal of General Psychology*, 1943, **29**, 251-60.
- (20) GLUECK, B. 'The Psychopathic Delinquent', *Journal of Mental Hygiene*, 1918, **2**, 119-49.
- (21) GURVITZ, M. S. 'The Intelligence Factor in Psychopathic Personality', *Journal of Clinical Psychology*, 1947, **3**, 194-6.
- (22) GURVITZ, M., and DOLE, A. 'Revised Standards for the Well's Alpha', Unpublished Paper, 1946.
- (23) HENDERSON, D. K. 'Psychopathic States.' New York: W. W. Norton, 1939.
- (24) HODGE, R. S. 'The Impulsive Psychopath: A Clinical and Electro-Physiological Study', *Journal of Mental Science*, 1945, **91**, 472-6.

- (25) HUGHES, C. 'Moral Insanity', *Journal of Mental Science*, 1881, **21**, 470-9.
- (26) KAHN, E. 'Psychopathic Personalities.' New Haven: Yale University Press, 1931.
- (27) KARPMAN, B. 'The Individual Criminal.' Washington, D.C.: Nervous and Mental Disease Publishing Co., 1935.
- (28) KARPMAN, B. 'Conscience in the Psychopath', *American Journal of Orthopsychiatry*, 1948, **18**, 455-91.
- (29) KLEIN, G. 'Application of Discriminant Function to the Diagnosis of Schizophrenia', *Journal of General Psychology*, 1948, **38**, 159-79.
- (30) KNOTT, J. R., and GOTTLIEB, J. S. 'Electroencephalographic Evaluation of Psychopathic Personality', *Archives of Neurology and Psychiatry*, 1944, **52**, 515-9.
- (31) KOCH, I. L. 'Die Psychopathischen Minderwertigkeiten.' Ravensburg: Maier, 1893.
- (32) LEVI, J. 'A Psychometric Pattern of the Adolescent Psychopath.' Doctoral Thesis, New York University, 1943, pp. 81.
- (33) LEWINSKI, R. J. 'The Psychometric Pattern: I. Anxiety Neurosis', *Journal of Clinical Psychology*, 1945, **1**, 214-21.
- (34) LEWINSKI, R. 'The Psychometric Pattern: II. Migraine', *Psychiatric Quarterly*, 1945, **19**, 68-76.
- (35) LEWINSKI, R. 'The Psychometric Pattern: III. Epilepsy', *American Journal of Orthopsychiatry*, 1947, **17**, 714-22.
- (36) LINDNER, R. M. 'Experimental Studies in Constitutional Psychopathic Inferiority', *Journal of Criminal Psychopathology*, 1942-43, **4**, 252-75 and 484-504.
- (37) LINDNER, R. M. 'The Rorschach Test and the Diagnosis of Psychopathic Personality', *Journal of Criminal Psychopathology*, 1943, **5**, 69-93.
- (38) LINDNER, R. M. 'A Formulation of Psychopathic Personality', *Psychiatry*, 1944, **7**, 59-63.
- (39) LINDNER, R. M. 'Rebel Without a Cause.' New York: Grune and Stratton, 1944.
- (40) LINDNER, R. M. 'Psychopathic Personality and the Concept of Homeostasis', *Journal of Clinical Psychopathology and Psychotherapy*, 1945, **6**, 512-21.
- (41) LINDNER, R., and GURVITZ, M. 'Restandardization of the Revised Beta Examination to Yield the Wechsler Type of I.Q.', *Journal of Applied Psychology*, 1946, **30**, 648-58.
- (42) MACHOVER, S. 'Cultural and Racial Variations in Patterns of Intellect', *New York Teachers' College Contribution to Education*, No. 875, 1943, pp. 1-91.
- (43) MAGARET, A. 'Parallels in the Behavior of Schizophrenics and Seniles', *Journal of Abnormal and Social Psychology*, 1942, **37**, 511-28.
- (44) MAUGHS, S. 'A Conception of the Psychopathic Personality', *Journal of Criminal Psychopathology*, 1941, **2**, 329-56.
- (45) MERCIER, C. 'Moral Imbecility', *Practitioner*, 1917, **99**, 300-11.
- (46) MEYER, A. 'Psychopathic Personalities', *Journal of Abnormal and Social Psychology*, 1912, **7**, 359-69.
- (47) OLCHE, D. 'Patterns of Schizophrenics on the Wechsler-Bellevue', *Journal of Consulting Psychology*, 1948, **3**, 127-36.
- (48) OTTINGER, B. 'Some Observations Upon the Delusions and Moral Idiocy', *American Journal of Medical Sciences*, 1902, **27**, 10-9.
- (49) PARTRIDGE, G. E. 'Current Conceptions of Psychopathic Personality', *American Journal of Psychiatry*, 1930, **10**, 53-79.



- 
- (50) PREU, P. W. 'The Concept of Psychopathic Personality', in 'Personality and the Behaviour Disorders', ed. by J. McV. Hunt. New York, 1944, pp. 922-37.
- (51) PRICHARD, J. C. 'A Treatise on Insanity.' Philadelphia: Haswell, Barrington and Haswell, 1837.
- (52) RABIN, A. 'Test Score Patterns in Schizophrenic and Non-psychotic States', *Journal of Psychology*, 1941, **12**, 91-100.
- (53) RABIN, A. 'Psychometric Trends in Senile Psychoses', *Journal of General Psychology*, 1945, **32**, 149-62.
- (54) RABIN, A. 'The Use of the Wechsler-Bellevue Scales with Normal and Abnormal Persons', *Psychological Bulletin*, 1945, **42**, 410-22.
- (55) RAPAPORT, D. 'Diagnostic Psychological Testing.' Chicago: The Year-book Publishers, 1945, pp. 318.
- (56) REYNAL, W. 'A Psychometric Method for Detecting Loss Following Head Injury', *Journal of Mental Science*, 1944, **90**, 710-19.
- (57) SANDOZ, H. 'Child Psychopathic Personalities', *Journal of Nervous and Mental Diseases*, 1919, **49**, 136-43.
- (58) SCHAFER, R. 'The Clinical Application of Psychological Tests.' New York: International Universities Press, 1948, pp. 340.
- (59) SCHNEIDER, KURT. 'Die Psychopathischen Persönlichkeiten.' Leipzig-Vienna: Franz Deuticke, Third Edition, 1934, pp. 123.
- (60) SILVERMAN, D. 'Clinical and EEG Studies of Criminal Psychopaths', *Archives of Neurology and Psychiatry*, 1943, **50**, 18-33.
- (61) SLOAN, W. 'Validity of the Wechsler DI', *Journal of Clinical Psychology*, 1947, **3**, 287-88.
- (62) STEEN, R. 'Moral Insanity', *Journal of Mental Science*, 1913, **59**, 478-86.
- (63) STROTHER, C. 'The Performance of Psychopaths on the Wechsler-Bellevue Test', *Proceedings of the Iowa Academy of Science*, 1944, **51**, 397-400.
- (64) THOM, D., and SINGER, D. 'Psychopathic Personality', *Mental Hygiene*, 1922, **6**, 29-34.
- (65) TREDGOLD, A. 'Moral Imbecility', *Practitioner*, 1917, **99**, 39-47.
- (66) VAN VORST, R. 'Abstract', *Psychological Bulletin*, 1943, **41**, 583.
- (67) VISHER, J. 'A Study in Constitutional Psychopathic Inferiority', *Mental Hygiene*, 1922, **6**, 729-46.
- (68) WECHSLER, D. 'The Measurement of Adult Intelligence.' Baltimore: The Williams and Wilkins Company, 1944, pp. 258.
- (69) WEIDER, A. 'Effect of Age on the Wechsler Intelligence Scale in Schizophrenic Patients', *Psychiatric Quarterly*, 1943, **17**, 337-46.
- (70) WISHNER, J. 'Rorschach Intellectual Indicators in Neurotics', *American Journal of Orthopsychiatry*, 1948, **17**, 262-73.
- (71) WITTELS, F. 'The Criminal Psychopath in the Psychoanalytic System', *Psychoanalytic Review*, 1937, **24**, 276-91.

# RECENT TRENDS IN THE MANAGEMENT OF PSYCHOPATHIC OFFENDERS

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In the last two decades more attention has been given to the care and treatment of psychopathic offenders while in institutions. So far as the adult offender is concerned this has raised a group of new problems which nearly all countries are trying to solve by the provision of special laws and special institutions. It may be opportune therefore to compare the experience of Denmark, Sweden and the United States in this respect with current trends in England. These three countries are chosen because there has been opportunity to visit them; such experiments mean little unless they can be seen in operation and discussed, and also unless one can at least catch a glimpse of the social and legal attitudes from which they spring. Medical and economic resources in this field are very limited in all countries; it is not only the type of solution which is interesting but which aspect has been given priority.

It will be clear that the word 'psychopathic' is used in a variety of ways. Though we may hold in view the central group of aggressive or inadequate psychopaths of Henderson, there are a much larger number of clinically similar cases whose abnormality is more intelligible in terms of psychopathology and more accessible to treatment; and at times more strictly neurotic offenders are included. The attempt to define too rigidly the scope of psychiatric treatment or the type of offender who requires it has caused much confusion. From the present point of view it is especially necessary to realize that, though sex offenders and recidivists are frequently psychopathic, many are also from the psychiatric point of view either normal or merely unusual, or the reasonably well-adjusted products of unusual training.

## SPECIAL LAWS

### *United States*

In all four countries legislation to deal with the psychopathic offender has been introduced or proposed. In the U.S. it has dealt almost exclusively with the sex offender. Starting with Michigan (1937) and Illinois (1938), 16 states have now introduced 'sexual psychopath' laws, and more are planned. These are of two main types, depending on the two possible approaches—as an extension of persistent offender legislation or of insanity legislation. The first group was roughly modelled on the Illinois Statute (1). This provides that if anyone charged with any criminal offence is thought to



be a 'criminal sexual psychopathic person' (*i.e.*, 'suffers from a mental disorder not insane or feeble minded, existing for a period of one year and coupled with criminal propensities towards the commission of sex offences') he may, at the instance of the State Attorney or Attorney-General, be given a hearing before a jury *before* conviction, at which evidence of the commission of other offences may be given. If the jury finds that he is such a person on the evidence of two psychiatrists appointed by the court, he is committed to the Department of Public Safety (in practice the psychiatric wing of a prison) 'until fully and permanently recovered'. He may apply at any time for a jury hearing to decide whether he has recovered. When he has, he is returned to court and, if convicted, may be sentenced as usual for the offence, or otherwise dealt with. The Illinois Statute is, however, unusual in having a 'double barrel' (3) making it compulsory for anyone serving a prison sentence for a serious sex crime to be examined as to psychopathy before release.

The second and usually later type of statute, in force in five states, is exemplified by the Washington, D.C., Statute, 1949 (5), which provides that a person, whether or not charged with any offence, may be found a sexual psychopath if, although not insane, he shows 'repeated misconduct in sexual matters evidencing lack of power to control his sexual impulses', and is, according to the evidence of two psychiatrists, 'likely to attack or otherwise inflict injury loss or pain or other evil on the object of his desire.' If so found, he will be committed to a mental hospital indeterminately. The superintendent may recommend his release on a finding that he has sufficiently recovered as not to be dangerous. He is then returned to court to answer the criminal charge, if any; if otherwise, is released.

These statutes are clearly related to those dealing with the insane offender. The finding of psychopathy, however, is no defence in these five states, though it is in three others. Since no offence has been committed, jurisdiction with regard to psychopathy is thus transferred to the civil courts.

There are many variations of these two basic patterns, too numerous to mention. Eight statutes specifically mention 'sexual psychopath' or similar term, five employ no jury but five do so at the discretion of the defendant or court. In two cases the law applies also to juveniles. Commitment is to a mental hospital in all but three states, for an indeterminate period in all but one. Release and parole procedure also varies widely.

It is not surprising that the majority of these statutes have been very little used—in four states not at all, in six hardly at all. Illinois has committed only 16 cases in 10 years, though some states have 20 to 30 cases a year. In 1948-49, while 636 sex offences took place, Washington, D.C., committed 20 cases, chiefly of repeated indecent exposure. It may be that

some statutes were never intended to be used, since several were hastily passed in response to a wave of public alarm, often nurtured by press campaigns, about the prevalence of serious sex crimes. The courts have been reluctant to use such sweeping powers, especially when mental hospitals are overcrowded and cannot provide the necessary treatment. The failure, however, has been partly attributed—at least by lawyers—to the ‘stringent requirements’ necessary to obtain a committal, and the second type of statute—which Illinois proposes to adopt—represents an attempt to overcome them. In so doing, however, worse difficulties are encountered. Since no offence may have been committed, committal depends entirely on the results of psychiatric interview. The accused claims the right not to incriminate himself and refuses to give a history. Washington, D.C.’s, and Illinois’ proposed statute provide that the accused may be compelled to co-operate—on the analogy that the insane person is so compelled—but it may pay the offender to be found guilty of contempt of court (1).

These laws have been strongly criticized, especially by Sutherland (15); Tappan, adviser to the New Jersey Commission (2), has published an excellent critical analysis of their deficiencies and false assumptions. His recommendations for an adequate sex offender law agree closely with those of the authoritative Forensic Committee of G.A.P. (6)<sup>1</sup> and have been largely embodied in the recent New Jersey Act. Both owe a great debt to Kinsey’s researches (14), which include the histories of 2,000 convicted sex offenders, and a wide knowledge of comparative sex law (4). This Act provides that a person convicted of rape, sodomy, carnal abuse, impairing the morals of a minor or attempts to commit any of these crimes shall be remanded before sentence to the diagnostic centre of Menlo Park. If it be determined by clinical examination that the offender’s conduct was ‘characterized by a pattern of repetitive-compulsive crime and violence or age disparity between victim (under 15) and adult offender’, the court shall commit the offender to a programme of treatment which may be either probation with out-patient treatment, intensive psychiatric treatment in a specialized facility, commitment to a state mental hospital or prison for an indeterminate period, the maximum not to exceed that provided for the crime. The psychiatric recommendations are apparently not binding on the court, though strongly commended.

These laws have to be interpreted against the background of a society which often preserves very strict sex laws—in 38 states extra-marital intercourse of any sort is an offence, not infrequently punished in fact by imprisonment. Kinsey has found that 85 per cent. of the adult population have at some time committed offences and that ‘it is not more than 5–10 per

<sup>1</sup> Group for the Advancement of Psychiatry.



cent. of persons . . . convicted as sex offenders who are involved in behaviour which is fundamentally different from that of a high proportion of the rest of the population' (4). Laws such as New Jersey's represent in part an attempt to reduce the field of illegal sexual behaviour. The vigorous controversy has shown how difficult it is to provide for the treatment and control of the more serious sex offender. If the law uses the criterion of recidivism, then it is principally the minor offender, such as the exhibitionist, who is singled out but who rarely progresses to more serious offences. Major sex offences, such as rape, seem to be repeated less often than almost any crimes except murder (15). It is difficult to be sure, however, since many sex offenders are prosecuted under the heading of assaults, etc., and the significance of rape varies widely. In New York, out of 138 persons convicted of rape, 43 were put on probation or fined; yet in a careful treatment-investigation of 102 serious sex offenders in Sing-Sing (with a population of 1,800) Abrahamsen found 18 in 2 years who were classed as 'predisposed to crimes of violence . . . and not treatable by present known methods'; 32 others were 'unsuitable for treatment at present and likely to continue a danger' (23).

Only two American groups seem to have doubted, by implication, the wisdom of introducing special legislation limited to sex offenders. The G.A.P. Committee (6) and the Maryland Commission (7) advise the use of laws which may apply to all the mentally abnormal. The Maryland Commission revives the old idea of the moral defective. It proposes the indeterminate commitment to a special institution of 'delinquent defectives'—'defective in the two spheres of human behaviour, the intellectual and the emotional . . . inadequacy in either or both of these spheres can be shown . . . it is possible in the case of the criminal psychopath to have a high intelligence together with an emotional inadequacy.' It is highly original in suggesting the establishment of a Medical Court Service, independent of the Department of Correction, which will examine all murderers and sex offenders and any others before sentence, administer a special institution and supervise the classification of offenders sentenced to imprisonment (7).

### *Denmark*

The Danish 'psychopath' law is directly linked to a special institution. Section 17 of the 1930 Act provides for those offenders who are, 'on account of under-development, weakness or derangement of mind, including sexual abnormality, in a state of a more permanent nature, but not of a character for which provision is made in Section 16' (dealing with insanity or 'a similar condition of mind'). If judged on medical advice to be unlikely to benefit from punishment such an offender may be committed to the

Herstedvester psychopathic institution. Sentence is quite indeterminate: the same court may release on indeterminate parole at any time on the superintendent's advice. Parole is administered from the institution itself, and a parolee who commits a further offence will either continue on parole or return to the institution unless the offence is quite different from the original one, when he may be discharged from section 17. Cases are not transferred to or from other prisons. About 500 cases have been dealt with in about 18 years—about one-third of them sex offenders.

The initial reluctance of courts to use the indeterminate sentence must have been considerably lessened by the use of castration for sex offenders; for, whatever the view about the desirability of such radical treatment, it is certainly effective<sup>2</sup> and allows rapid release.

Secondly, commitment has been made only after the offender 'has been in prison again and again' (10). As we have seen, the use of recidivism as a test of psychopathy does not ensure that the most difficult cases are selected. Of the first 300 cases committed, 29 per cent. were for sex offences against children, 6 per cent. for exhibitionism, 3 per cent. for rape, 6 per cent. various non-sexual crimes of violence, and it is not clear to what extent these are the cases who most urgently need special treatment (12). Dr. Stürup has estimated that 5 per cent. of first offenders in prison and 37 per cent. of offenders in recidivist prisons are as mentally abnormal as the population of Herstedvester. Since the results of treatment of the non-sexual offender have been highly successful, proposals have been made for a classification centre for all types of prisoner and for the provision of a somewhat modified psychopathic prison for selected recidivists.

Apart from its value to the parolee, the parole system attached to this institution has automatically provided the material for checking judgments about release and for demonstrating the value of such an institution to the courts.

### *Sweden*

The trends of recent legislation or of suggested legislation have strong resemblances in Sweden and England. In 1927 Sweden passed an act which provided that the mentally abnormal but not insane offender who committed a serious crime could be sent to preventive detention for an indeterminate period in a special institution. Like most of such laws, it seems to have been little used. The less ambitious but more practical 1945 Act, however, still theoretically differentiates the mentally abnormal offender

<sup>2</sup> Among 79 released castrated sex offenders, two-thirds of whom have been free for more than 5 years, 3 repeated sex offences and 14 non-sexual offences. Of 40 sex offenders released without castration, 15 committed sex offences, and 10 other offences (12).



from the recidivist.<sup>3</sup> The law defines as mentally abnormal an offender who 'is found to have deviated and still deviates from the normal, yet is not unpunishable' in accord with sections referring to insanity. If owing to his mental abnormality he is unreceptive to penal treatment or is dangerous to persons or property, has committed an offence punishable by imprisonment at labour (or if a sex offence simple imprisonment) he may be detained in a security institution for between 1-12 years, the court fixing the minimum. It also provides, as in Illinois, that a prisoner serving a simple sentence may, if considered abnormal or a danger after release, be committed to detention while in prison; this provision had not been used, at least up to 1949.

A recidivist, however, who has served a total of 4 years in two previous prison sentences, and has committed a crime punishable by imprisonment at labour, may be *interned* for 5-15 years. Both categories subsequently serve 3-5 years on parole.

In practice the use made of these sentences seems to provide an example of what might be called the 'inverted Gresham's Law' of legal administration—'Good definitions drive out bad.'<sup>4</sup> At the end of 1946 there were about 200 detainees and 20 internees, and it is conceded that those liable to internment were often given the lesser detention sentence, and the detention sentence largely based on evidence of recidivism. All prisoners with sentences of more than six months are psychiatrically examined, in selected cases with great thoroughness; but it seems that only a minority of detainees are selected on psychiatric grounds.

### *Great Britain*

Our own law provides for the psychopathic offender in four ways: (i) Section iv of the Criminal Justice Act, 1948. (ii) The Infanticide Act, 1938. (iii) In Scotland the reduction of murder to culpable homicide if the offender suffers from 'weakness of mind . . . some form of unsoundness.' In practice this is said to be associated with 'alcoholism, epilepsy, overstress, infidelity' (25). It apparently excludes psychopathic personality, although clearly referring to other types of psychopathic offender.

(iv) Fourthly, the offender may be detained indefinitely as a moral defective (i.e. one in whom there exists 'a condition of arrested or incomplete development of mind existing before the age of eighteen years coupled with strongly vicious or criminal propensities'). As pointed out by a recent Joint

<sup>3</sup> The criteria for corrective training and preventive detention in the 1938 English Criminal Justice Bill seem similarly to have made references to the character of the offender since deleted in the final Act, 1948.

<sup>4</sup> The use made of the criteria of age and mental abnormality respectively in the Infanticide Act, 1938, perhaps provides the best English example.

Committee, moral defect is not necessarily present from an early age, nor a permanent condition, nor necessarily associated with scholastic backwardness (20). The Committee, in discussing 'individuals whose psychopathic personality brings them into conflict with the law', stated that 'a considerable number . . . can be and are detained as moral defectives. . . . More could and should be dealt with in this way if the act were interpreted as suggested', i.e. if 'social inefficiency is used as the main criterion for determining defectiveness'. For those who are not certifiable but do not respond to treatment under section iv of the Criminal Justice Act new arrangements are needed with legal detention 'in an institution under lay control with medical help'.

The Home Office Advisory Council has recently (16) proposed that the law should be amended to enable courts of Quarter Sessions and Assizes to make an order for treatment under detention, in a special institution, for a period not to exceed the present legal maximum, of uncertifiable offenders with abnormal mental characteristics. It proposes that the power to commit should be with the court and not the jury, and that the court should be able to call for independent psychiatric advice at public expense. Also that the Prison Commission should be able to recommend remission of such sentence as necessary, should report on the suitability of the case for treatment and signify its willingness to accept it before committal, and have power to transfer prisoners to it and unsuitable treatment cases from it.

In addition, the Joint Committee on sex offenders (19) recommends that all courts should have power to pass a longer sentence than at present on cases of exhibitionism, but only if it could be served in a special institution of apparently similar type.

#### SPECIAL INSTITUTIONS

The special institutions which are most relevant to this survey are Herstedvester (Denmark); Lovsta and Håga Institutions and Langholmen Annexe (Sweden); the Federal Medical Facility, Springfield, the Californian Medical Facility, Long Beach, and New Jersey Diagnostic Centre, Menlo Park (U.S.). These are all separate institutions with a medical superintendent. They represent different views of the type of service most urgently required.

Haga, Langholmen and Springfield are partly concerned with the psychiatric examination of remand cases; Menlo Park entirely so. The latter is legally constituted to advise on the disposal of sex offenders.

Only one of these psychopathic prisons receives cases specially sentenced to it—Herstedvester. This will be familiar to many readers, and only a few features will be mentioned. The central prison allows very free movement within high walls—made possible with safety by having a large staff—one



officer to two patients. Two open prisons some miles away serve as annexes for cases nearing discharge. As a whole the institution holds 300, and we must realize that the provision of similar facilities in England per head of population would require 12 institutions of the kind and an increase by 50 per cent. of the present prison officer corps. If only for economic reasons, such institutions must be productive. The basic standard of living is higher than in other Danish prisons, with good training, occupational, recreational, pay and canteen facilities and occasional home visits. Various houses provide ascending scales of privilege above this, until the prisoner can largely control his own life and work without any supervision. As we saw, the prison is not designed to deal with psychopathy within the general prisons. However, it disposes of the controversy as to whether psychopaths can be treated together—at least if all types are included. For, though it prides itself on being able to manage the most troublesome and dangerous, it also includes cases which adjust very well—all too well—to institutional life.

The other psychiatric prisons, in Sweden and the U.S., serve the interests of their prison services by caring for those who cannot adjust to prison life. In general they provide beds for about 2 per cent. of the prison population. In the U.S. chronic physically sick—especially the tuberculous—are included, and beds then reach 5 per cent.; Springfield has 1,164 beds for a Federal prison population slightly smaller than England's.

The psychopaths who find their way to these hospitals are those who develop mental illnesses—especially the transitory reactive 'prison psychoses', the grossly inadequate, the aggressive and, in America, the homosexual. Long Beach also receives sex offenders for psychotherapy. The removal of all these cases is very valuable. The more the prisons develop freedom for work and recreation, the more conspicuous become those who cannot adjust to any responsibility. They not only hold up all development in prisons but call down repeated punishments on themselves.

The development of reactive psychoses with hysterical or malingered features is encouraged if conditions in such hospitals are much better than in prison. Though Håga and the American hospitals are modern mental hospitals of the best type with opportunity for occupational therapy, the prisons have in fact more to offer in sport, entertainment and variety of occupation, and prisoners are keen to go back on recovery. Discipline is no stricter, though this demands an unusually large staff.

The aggressive psychopath is the most important of these groups, for there is no doubt that a few incorrigibly troublesome and unstable cases can poison the atmosphere of a prison and make the officers and the normal prisoners tense, suspicious and irritable. Uncooperativeness is of course

infinitely variable, and it may not be possible to select such cases until they have been baptized with increasingly severe punishments. All American prisons have large segregation blocks, and sometimes an *impasse* of local prestige factors will result in close confinement for long periods. However, the Federal Service has made determined efforts to regard many cases as mentally abnormal and has divided them between Springfield and Alcatraz—a very secure little prison for about 260 recalcitrant prisoners which quite belies its sinister reputation. Neither has the heavily-charged atmosphere of revolt which is found in some large state prisons.<sup>5</sup>

Homosexuals are also frequently transferred to medical observation. If not, they are usually segregated in blocks for about 2 per cent. of the prison population. Since Kinsey found that 4 per cent. of the general population were exclusively homosexual and that a far greater number in prisons had physical homosexual relations, the basis of selection is probably rather arbitrary. However, some individuals are the frequent cause of feuds, mental breakdown and knife attacks, etc., and the problem cannot be ignored.

In Sweden, special emphasis has been laid on the psychiatric needs of juveniles—another respect in which it resembles England. Delinquents under 17, and sometimes 21, are treated in open institutions without any punishment except occasional fines, and the few serious offenders from 17–21 in non-punitive youth prisons. The 5–10 per cent. of the former who cannot be managed on these principles are regarded as cases for medical treatment—necessarily, unless the principle is fundamentally unsound. They are sent to the psychiatric institution of Lovsta—also an open institution—which has its own after-care system and exercises its right to recall or advise about all ex-inmates who cause trouble. It is interesting to find that it has recently been necessary to provide beds in the closed psychopathic prison of Håga for incorrigible youthful prisoners.

In England, perhaps because of the traditional reluctance to interfere with individual liberty, determined and often successful attempts have been made, especially at the I.S.T.D., to treat the psychopath while at liberty by surrounding him with therapeutic influences of all kinds. Wherever possible this is, of course, the method of choice. There is always an unfortunate tendency to think of institutional treatment, when available, as offering a simpler rather than a more complex solution and to use it in too wide a range of cases.

East and Hubert (21) recommended the provision of a special penal institution which would serve as a clinic and hospital for treatment and investigation; as an institution for special training and treatment under

<sup>5</sup> However, most violent crimes are not Federal offences !



psychiatric guidance; a colony for those unable to adapt to prison but not accessible to reform; and an institution for mentally abnormal Borstal lads. The institution considered by the Advisory Council is 'substantially that proposed in the East Hubert report, but with the difference that it should not be regarded as a specialized prison within the penal system' but 'be removed as far as possible from the prison atmosphere' (16).

The Committee to review punishments, too, recently accepted the view that, while 10 per cent. of convicted prisoners were mentally abnormal, 5 per cent. should be accepted as medical responsibilities suitable for a special institution (24). Another 1 per cent., however, should be sent to a 'prison where discipline would be of the strictest kind . . . for continued misconduct and defiance of authority.' In Borstals 2-3 per cent. of lads needed removal to a 'corrective institution': those few who required removal to the East-Hubert institution were not such an acute problem as in the prisons.

#### INSTITUTIONAL TREATMENT

It is generally agreed that individual psychotherapy cannot be successfully undertaken in institutions by those who have virtually complete control of the duration of sentence, at least in adult cases. At Herstedvester, where this applies, a different treatment is used. Such cases may show little desire to change until brought face to face with an indeterminate sentence. Ultimately realization will lead to a critical outburst of anxiety, shown by illness or misconduct, which can be used constructively to induce greater insight and control. The patient's morale is supported and he is helped by being spared some of the consequences of his actions in the hospital. Formal punishment is reserved for theft and attempt to escape.

Treatment of this sort means that the staff must co-operate closely with the doctors, must have the tact and forbearance of mental nurses and be sufficiently numerous to feel secure. Case conferences are held to encourage initiative in the junior staff and maintain a flexible discipline. Secondly, the aim is to secure minimal adjustment under supervision rather than 'cure'. The psychopath is almost certain to react strongly on release and is supervised from the institution during this period.

English (26, 22) and American (23) experience shows that individual and group therapy can be effective in prison, provided the therapist has a neutral or advisory status. Mackwood (26) has spoken of the different relations which the patient can be persuaded to maintain with the therapist and the medical administrator. Much of the benefit is lost, however, unless there is flexibility in three directions. The patient may relapse if there is no means of releasing him at a suitable time; hopeful cases may be untreatable because

the sentence is too short. Thirdly, it has been shown repeatedly in America that a welcome response to treatment may bring the inmate or a group into conflict with the organisation of a prison which is not specially adapted to them. These difficulties are, of course, generally accepted and are the basis of the Advisory Council's and other proposals.

The differentiation of those cases who are accessible to psychotherapy, however, can often only be made after fairly prolonged exploration in which diagnosis and treatment are interwoven. Whether this could be achieved quickly and adequately while the patient was awaiting sentence seems debatable. It is hardly necessary to add that the doctor who advises about sentence should not take part in treatment.

#### DISCUSSION

These special laws and institutions, of course, can only be judged fully in relation to the social and legal systems in which they operate, but we can note some recurrent tendencies.

This survey shows that psychiatry is valuable chiefly at the extremes of the criminal scale—in treating the 'best' and the 'worst' offender. It shows too that medical and financial resources are rarely sufficient to provide for both. In England it can hardly be doubted that the 'worst' is most in need of care, if only in the interests of the average. Projected development in prisons and the non-punitive principle of Borstal are both threatened because of the lack of a special institution to serve the penal system as well as provide facilities for psychotherapy. Developments abroad suggest that such an institution will be necessary, whatever other treatment centres are established. The difficulty of providing a large staff when normal prison needs cannot be met, however, suggests that the staff might be found in the health service. Whatever the original building, a wide variety of types of custody under one control is usually regarded as essential. A special after-care system seems much more important than is generally realized.

It is clear that laws providing special sentences for uncertifiable mentally abnormal offenders are difficult to administer in the present state of psychiatry. If there is no provision for adequate diagnosis and treatment they will naturally fail. Even when there are facilities, however, general laws referring to abnormality in any type of offender put a great strain upon them. Courts will tend to fall back upon recidivism as the main index of mental abnormality and, although all cases sent for treatment may be suitable, it will be difficult to ensure that the *most* suitable or that *all* those suitable are sent, partly at least because it is not the court's duty to collect the necessary evidence. It is, of course, the court's duty to consider much else besides the offender's needs—the need to deter others, to reflect public rather than



special opinion about abnormality. Courts, too, are fortunately unlikely to be deceived into supposing that 'treatment detention' or 'non-punitive security custody' are much less penal than imprisonment.

Laws dealing only with special types of crime try to avoid these difficulties. In a limited field, investigation of a large number of offenders can be undertaken, recommendations made to the court and treatment facilities provided. Such laws represent an extension of juvenile court practice and can only be acceptable where there is close consultation about most cases, and agreement about some degree of separation between the court's convicting and sentencing functions. In England we are now universally opposed to laws for only one class of offender (though in the past special consideration was given to homicide cases), but this serves to emphasize that special treatment facilities in the penal system will remain necessary.

Unfortunately, from the English point of view, wherever either type of law has been successfully used—in Denmark and New Jersey especially—there have been peculiar local advantages. Both have a population only half that of London, which allows an outstanding psychiatrist such as Dr. Stürup or Dr. Brancale to come to occupy a position of trust in the administration of the law. In Scandinavia, too, the relative absence of a jury system and the greater development of the psychiatrist as a neutral adviser to the courts, whose actions are supervised by an authoritative medico-legal board, have helped to produce uniform standards.

The present English law gives scope for great development. There is no legal barrier to the differentiation within each medical region of a mental hospital in which voluntary patients and out-patient offenders are treated by a staff which makes remand examinations and obtains the experience to be trusted by local courts. Such local specialization seems necessary since the inmates would not often be incapacitated and would need, if only for economic reasons, occupational and industrial facilities of the type of colonies for defectives; and the need for adequate social investigation, adjustment and after-care for such minor offenders could only be met locally. The full force of the persuasion which can be used under section iv of the Criminal Justice Act, 1948, does not seem to have been demonstrated, owing to lack of effective medico-legal co-operation. But if, after such development, special treatment sentences were provided, they might be spent in secure sections of such local hospitals, since the numbers of such cases, normally liable to six months' imprisonment, would be beyond the capacity of a national treatment centre, and severance from local social influences undesirable. As Penrose has pointed out, such custody costs much less than imprisonment.

In the penal system, the long but reducible sentences to Borstal or

corrective training have all the requirements of a treatment sentence. Psychiatric rather than legal difficulties prevent the remand for a report as to suitability being used constructively for the thorough examination of a wide range of cases, whether or not there is real intention to use the sentence. To provide wider powers to remit simple sentences, however, might not be too radical a change from the legal standpoint.

The future clearly depends on two other developments. If psychiatric advice is to command respect it must not only depend on a close individual relationship of the psychiatrist with the court but have also the control and support of the best psychiatric authority. This clearly prompted the Maryland Commission to advise as a first step the establishment of a 'medical court service'. In England close association with regional universities and teaching hospitals seems required. This would also allow the necessary compromise between the need for considerable specialization and for contact with general psychiatry; for, as Diethelm has pointed out, psychiatrists dealing with psychopaths need to be protected against the effects of repeated discouragement (18).

Secondly, research is needed in a wide field. Advice about treatment implies ability to make predictions of future behaviour. Psychiatry must prove its ability to do this and obtain the information to improve it.

#### REFERENCES

- (1) MINOW, N. 'The Illinois Proposal to confine Sexually Dangerous Persons', *J. Criminal Law and Criminol.*, 1949, **40**, 186-97.
- (2) TAPPAN, P. 'The Habitual Sex Offender.' Report of New Jersey Commission. Trenton, 1950, pp. 68.
- (3) HAINES, W., HOFFMAN, H., and ESSER, R. 'Commitments under the Criminal Sexual Psychopath Law in the Criminal Court of Cook County, Illinois', *Amer. J. Psychiat.*, 1948, **105**, 420-5.
- (4) KINSEY, A. Evidence in 'Report of Sub-Committee on Sex Crimes.' State of California: Sacramento, 1950, pp. 103-23.
- (5) CRUVANT, B. A., MELTZER, M., and TARTAGLINO, F. J. 'An Institutional Program for Committed Sex Deviants', *Amer. J. Psychiat.*, 1950, **107**, 190-4.
- (6) Committee on Forensic Psychiatry of the Group for the Advancement of Psychiatry. Report No. 9: 'Psychiatrically Deviated Sex Offenders'. Topeka, Kansas, 1950, pp. 8.
- (7) Report of Commission to Study Medico-legal Psychiatry. State of Maryland, Baltimore, 1948, pp. 32.
- (8) SELLIN, T. 'Recent Penal Legislation in Sweden.' Stockholm: Marcus, 1947, pp. 70.
- (9) STÜRUP, G. 'Treatment of Criminal Psychopaths.' In 'Report of 8th Congress of Scandinavian Psychiatrists, 1946'. Copenhagen: Munksgaard, 1947, pp. 21-33.
- (10) STÜRUP, G. 'Treatment of Criminal Psychopaths in Denmark.' In 'Danish Psychiatry'. Copenhagen: Schonbergske Forlag, 1948, pp. 44-55.



- (11) STÜRUP, G. 'Importance of Psychiatry in Prison Work.' Preparatory Paper No. 1 (2), 12th International Penal and Penitentiary Congress. Admin. of Prisons. The Hague, 1950, pp. 11.
- (12) STURUP, G. 'Management and Treatment of Psychopaths in a Special Institution in Denmark', *Proc. R. Soc. Med.*, 1948, **41**, 765-8.
- (13) STÜRUP, G. 'Psychopaths at Herstedvester.' Danish Govt. Film Committee. Herstedvester, 1950, pp. 8.
- (14) KINSEY, A. C., POMEROY, W. B., MARTIN, C. E. 'Sexual Behaviour in the Human Male.' London: Saunders, 1948, pp. 804.
- (15) SUTHERLAND, E. H. 'The Sexual Psychopath Laws', *J. Criminal Law and Criminol.*, 1950, **40**, 543-54.
- (16) Report of the Home Office Advisory Council on the Treatment of Offenders, *Lancet*, 1950, **1**, 1123-6.<sup>6</sup>
- (17) TAYLOR, S. 'The Psychopath in Our Midst', *Lancet*, 1949, **1**, 32-4.
- (18) DIETHELM, O. 'Concept of Psychopathic Personality.' In 'Handbook of Correctional Psychology', ed. by Lindner and Seliger. New York: Philosophical Library, 1947, pp. 384-94.
- (19) Report of the Joint Committee on Psychiatry and the Law of B.M.A. and Magistrates' Association: 'The Criminal Law and Sexual Offenders', *Brit. med. J.*, 1949, **i**, 135-40.
- (20) Report of ditto: 'Interpretation of Definitions in the Mental Deficiency Act'. B.M.A., 1947, pp. 10.
- (21) EAST, N., and HUBERT, W. H. 'The Psychological Treatment of Crime.' London: H.M.S.O., 1939, pp. 166.
- (22) Report of the Commissioners of Prisons for the Year 1949. London: H.M.S.O., pp. 174.
- (23) 'Report on the Study of 102 Sex Offenders in Sing-Sing Prison.' Utica, N.Y.: State Hospitals' Press, 1950, pp. 96.
- (24) Report of a Committee to Review Punishments in Prisons, etc. London: H.M.S.O., 1951, pp. 122.
- (25) Royal Commission on Capital Punishment: Evidence of Dr. Bruce. London: H.M.S.O., 1950.
- (26) MACKWOOD, J. 'Psychological Treatment of Offenders in Prison', *Brit. J. Psychol.*, 1949, **40**, 5-22.

<sup>6</sup> See also *Brit. J. Delinq.*, 1950, **1**, 151-2 (ED.).

My teacher also told me that one of the leading merchants had sent me an invitation to repair his house and to consider myself his guest for as long a time as I chose. 'He is a delightful man', continued the interpreter, 'but has suffered terribly from (here came a long word which I could not catch only it was much longer than kleptomania) and has but lately recovered from embezzling a large sum of money under singularly distressing circumstances; but he has quite got over it and the straightners say that he has made a wonderful recovery; you are sure to like him.'

SAMUEL BUTLER: 'Erewhon.'

# THE PSYCHOPATH IN PRISON: A PRELIMINARY REPORT OF A CO-OPERATIVE RESEARCH

By D. STAFFORD-CLARK (LONDON); DESMOND POND (LONDON);  
J. W. LOVETT DOUST (LONDON)

There has been an immense amount written about psychopaths, about the multiplicity of factors which may contribute to the genesis of the psychopathic state, and about the difficulty and complexity both of defining this state and of treating it. This paper is a preliminary communication about a research project started in 1948 and soon, it is hoped, to be published in full, which has as its aim the establishment of an objective basis for definition and to collate both the factors responsible for the condition in its developed state and the conclusions to which these point as to how it may best be treated. The work is concerned exclusively with that section of the psychopathic population who are convicted of crimes and find themselves in prison. It embodies the results of careful individual studies of 165 subjects, and is the product of collaboration between members of a team of doctors from the Institute of Psychiatry, the Maudsley Hospital, London, of Medical Officers from His Majesty's Prisons, and of a psychiatric social worker.

As this is only a preliminary communication, little discussion of the literature will be attempted and no detailed list of references will be appended. The primary object of the research was definition and clarification of the problem of the psychopath in prison: its results and some of the directions in which they seem to point can only be indicated here in barest outline.

Curran and Mallinson, opening their chapter on Psychopathic Personality in a special number of the *Journal of Mental Science* (January, 1944), prefaced their observations with this quotation:

'I cannot define an elephant; but I know one when I see one.'

This accurately forecast the attitude of an article which was witty as well as informative and strove throughout for balance and objectivity rather than for any final statement of principles. The essential difficulty of dealing in any other way with the problem of psychopathic behaviour has been discussed by Stalker.<sup>1</sup> Writing of the specific problem of the criminal psychopath, with reference both to definition and to treatment, he says:

'It is very regrettable that, apart from some devoted work by a few pioneers, so little scientific study has come from our Juvenile Courts,

<sup>1</sup> Stalker, Harry: Chapter on Psychopathic Personality in 'Modern Trends in Psychological Medicine,' edited by Dr. Noel Harris.



Approved Schools, and Borstals. All the psychiatric methods of study, from proper case histories to electro-encephalography and genetics, should be utilized and not purely psychological methods.'

At about the time that these words were being written the project which is to be outlined was in fact getting under way.

Preliminary discussions between one of us (D. S-C), colleagues in the team, and medical officers from three of His Majesty's prisons in London established the fact that the clinical diagnosis of the psychopath in prison was something which every doctor who came into contact with prisoners felt able to undertake after his own fashion. Its basis was essentially impressionistic. Prison doctors were prepared to define their criteria and agree upon them to the extent of embracing most of the current formulations of psychopathic behaviour, of which the two most commonly accepted were those of Professor Sir David Henderson and Dr. H. Cleckley, in their respective books. Henderson's definition of the psychopathic state will best exemplify the clinical basis on which the initial selection of psychopathic subjects was made.<sup>2</sup>

The method adopted for the study was to select two groups of psychopaths, each of approximately fifty men, from among the prisoners in the three prisons made available for this study, and to match these for age with a further group of roughly the same number of prisoners selected at random from the same three prisons to act as controls. The two groups of psychopaths were divided into those in whose previous history there was evidence of head injury or a personal or family history of epilepsy and those in whom there was no such history or evidence of former injury or epilepsy. The only conditions imposed upon the selection of controls, apart from that required to match them for age as far as possible with the psychopaths, was the exclusion of any men with history of head injury or epilepsy along the lines just indicated. This selection was made in the first instance by prison medical officers, and every one of the men thus selected was then interviewed and examined by one of the authors (S.-C.) so that a standard clinical evaluation of psychopaths and controls could be made. We were thus provided with three main groups of subjects; psychopaths with head injury or epilepsy, psychopaths with neither, and controls.

All these subjects were then interviewed, the object of the research was explained to them in broad outline, and their co-operation was invited. It was very rare indeed for it to be refused. Once it had been obtained each man was given a full psychiatric and clinical examination by the author, including an examination of the nervous system; on a subsequent

<sup>2</sup> This definition is quoted in Dr. Gurvitz's paper in this issue, p. 92. (Ed.)

occasion the subject was further submitted to an electro-encephalographic study and to other special studies of a psychometric, physiological, and morphological kind, to be further indicated in the section devoted to technique. In a certain number of cases the psychiatric history taken was supplemented by a full social investigation. Our original intention had been to provide this in every case but this unfortunately proved impossible.

The aim of the method was to secure as wide and comprehensive an approach to the problem as was possible, selection on clinical grounds being followed by an approach to each of the three groups from four distinct angles; these were: (1) routine physical and psychiatric examination, (2) electro-encephalographic study, (3) psychological and constitutional study, and (4) examination of family and social background.

The scope of these studies naturally tended to overlap; they were divided between the three authors, the clinical investigation being in the hands of D. S-C., the electrophysiological studies being undertaken by D. P., while the psychological and constitutional aspects were covered by J. W. L-D. Social investigations in certain cases were undertaken by Miss P. M. Perrott, psychiatric social worker to H.M. Prison, Wormwood Scrubs.

#### CLINICAL MATERIAL

At the completion of the project 165 prisoners had been studied. They were divided among the three groups as follows:

|                                             |   |   |    |
|---------------------------------------------|---|---|----|
| Psychopaths without head injury or epilepsy | . | . | 48 |
| Psychopaths with head injury                | . | . | 42 |
| Psychopaths with epilepsy                   | . | . | 14 |
| Controls                                    | . | . | 61 |

All these men were drawn from H.M. Prisons at Brixton, Wormwood Scrubs, and Wandsworth. Their age ranged from eighteen to fifty-eight, with the vast majority falling within the group twenty to thirty-five. All of them were convicted prisoners serving sentences.

Their offences included most of the indictable crimes in the Calendar from petty larceny to murder. Violent and non-violent crime was well represented in both control and psychopathic groups. No attempt was made to classify men according to the nature of their offences or the number of times they had offended previously except in so far as these criteria may have influenced the clinical impression of the medical officers originally selecting them for inclusion in the psychopathic groups.

*Clinical Study.* The psychiatric and neurological study carried out on each subject was planned in advance to give the greatest possible opportunity for subsequent statistical evaluation of the factors listed. In drawing



up this plan we received invaluable assistance from Dr. A. Lubin and Miss Joan May, B.A., of the Department of Psychology of the Institute of Psychiatry.

The completed plan of examination was embodied in a four-page *pro forma* with headings designed to focus the attention of the examiner on all the clinical and historical features believed to be of importance in assessing psychopathic background and behaviour. Each one of these headings was so arranged that the information recorded under it could be scored on a simple quantitative and qualitative basis and correlated with the findings of the other investigations. In this communication an indication only of the main headings and the information sought to complete them can be given. After the usual preliminaries of name, age, date of examination and prison wherein the subject was seen, the headings dealt with the present complaints, if any, which the subject might make about his health or happiness. Under this heading the information might be scored as 'no complaint' or 'complaint of physical health' or 'complaint of emotion or mental state' or 'complaint of both.' Subsequent headings dealt with family history, personal history, previous criminal record, and present offence. Under the latter heading special provision was made for scoring the number of previous offences and whether any of them had included violence.

Continuing with the psychiatric history, evidence of early rebellion or aggression in the home, in the school or in society as a whole was recorded, together with changes of school, response to punishments and the frequency with which they had been given, response to appeals, and evidence of sustained activity in pursuit of a particular goal in youth; such evidence being covered under the headings of training or examinations completed on the one hand, or of plans made and adhered to on the other. Special inquiry was also directed to the psychosexual history, including early and adolescent sexual experiences, personality changes at and after puberty, attitude towards sexual relations between parents, between members of the same sex, and between members of opposite sexes. The subject's own sexual adventures and attitudes were also studied and recorded.

The occupational record of the patient was next covered. In every case the period since leaving school was scored against the number of jobs held, reasons for change, for example whether the subject walked out, was sacked or sought and gained advancement, the relationship with employers, the average period in all occupations and the longest and shortest period in one job.

Special items for clinical inquiry, each with their own heading, included evidence of nervous traits in childhood, of which eight were selected: they were nail biting, nose picking, enuresis, temper tantrums, nightmares,

sleep walking or night terrors, morbid fears, and evidence of general timidity or aggression. Evidence of abnormal metabolic lability, for example, cyclical vomiting in childhood and glycopenic effects, was also covered.

Finally the history of head injury, epilepsy, amnesia or allergic manifestations was checked in every case, and the assessment of each subject ended with a note by the examiner of those features in the clinical history and examination which seemed significant in establishing the diagnosis and confirming the selection of the patient.

*Electro-encephalographic Study.* All subjects came to the Institute of Psychiatry for this study. The records were done two at a time in the afternoon with a six-channel Ediswan machine. Bipolar recordings were taken in six standard positions. A Walter Frequency Analyser was in use throughout giving a frequency analysis of epochs on all six channels in all positions. A blood-sugar estimation was made on every subject by the method of Hagedorn and Jenson. If the over-breathing response was unstable it was repeated half an hour after 50 grams of glucose by mouth had been administered and a second blood-sugar level recorded. Criteria of abnormality in these cases were those put forward and adopted by the E.E.G. Society.

*Psychological and Constitutional Investigation.* These investigations consisted of capillary microscopy of the finger-nail fold, a test of intelligence, a questionnaire study which included a method of estimating the level of the subject's emotional maturity and of his aggressiveness, and finally a psychological test of 'neurotic character traits' (Crown's modification of Malamud's test, as employed at the Institute of Psychiatry, London University).

*Social Study.* This followed the usual detailed lines of psychiatric social inquiry and was based upon visits to the homes of the subjects, with their knowledge and consent. As has been mentioned, a number of factors precluded this aspect of the combined study from being completed in any but a small number of cases. The information derived from it cannot therefore be separately considered. In the cases in which it could be completed it proved a valuable check upon the details obtained from the subject in the original interview and examination.

## RESULTS

Preliminary results of these several studies can be given at this stage under their appropriate headings and also some indication provided of the extent to which these results can be correlated. The final implications of such correlations, which will be developed when the results are published in full, seem to suggest that a combination of the methods employed



delineates the psychopath and distinguishes him from both control and neurotic subjects on a firm basis.

*Results of Clinical and Historical Approach.* The statistical basis upon which these results have been evaluated is that of the capacity of the clinical approach to predict accurately whether or not a particular subject would be found to be a member of the psychopathic group or of the control group. This was secured by drawing up a series of contingency tables for each of the headings under which clinical inquiry and examination was made.

For example, under the heading of 'Response to Punishment' four possible categories were provided. The response of a particular subject placed him in one, and one only, of these four categories.

Every such heading provided therefore a basis for division of the whole group of 165 subjects between the various categories. In estimating the response of each individual to this inquiry attention was directed not simply to the immediate punishment which he was undergoing, which might well be just but which even the most normal prisoner reserves the right to resent, but to his life-long attitude to correction and punishment of whatever kind and from whatever quarter, from childhood onwards. This was sought in the course of the life history and the underlying attitude estimated as conservatively as possible. In this way the subject had to show a consistent refusal to accept the possibility that his conduct might have deserved punishment at any time for him to be placed in a category for which the rejection of punishment formed the criterion.

The four categories used in this instance were:

- A. Punishment accepted and alteration of conduct displayed.
- B. Punishment apparently accepted but no alteration of conduct.
- C. Punishment resented but an attempt made to avoid trouble.
- D. Punishment resented with the response of rebellion and a determination to get even with society.

In practice the majority of the psychopaths fell under groups B, C, and D, whereas the majority of the controls came under A. The actual division thus achieved was compared with the theoretical division which would have been achieved if all psychopaths had fallen into the last three categories and all controls into the first; if in fact this particular criterion had proved to be an absolute one. The efficiency with which the prediction of whether a particular subject would be assessed clinically as a psychopath by comparison with this absolute standard was then calculated and its significance compared with the division which could be expected between the two groups by chance alone. In the example given above, if falling into group A was made a criterion for a control and into groups B, C or D, for a psychopath, 89.3 of the predictions made on this basis alone would have agreed with the

original clinical assessment. This gives a significance at the 1 per cent. level of confidence and means that with the size of the two groups as they were, their separation along the lines which actually took place could have occurred by chance alone less than one in a hundred times. The supposition from this therefore is that there is a strong positive correlation between the psychopathic state and the tendency of the subject to display a particular attitude towards punishment. This is the nearest sociometric method we have yet been able to devise for providing an objective confirmation of a clinical impression. It is the method used throughout the clinical investigation.

Quoting only those correlations which give a significance at the 1 per cent. level the following factors appear as significant.

| <i>Heading of Inquiry</i>        | <i>Tendency Displayed by Psychopaths</i>                                                                                 | <i>Reliability as a Method of Predicting Division between Psychopaths and Controls on this Basis alone</i> | <i>Level of Significance</i> |
|----------------------------------|--------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|------------------------------|
| Response to punishment .         | Rejection or failure to respond                                                                                          | 89.3                                                                                                       | Per Cent.<br>1               |
| Response to appeals . .          | Rejection or failure to respond                                                                                          | 86.7                                                                                                       | 1                            |
| Goals . . . .                    | Goals undefined or abandoned                                                                                             | 66.2                                                                                                       | 1                            |
| Plans . . . .                    | None made or none followed consistently                                                                                  | 68.9                                                                                                       | 1                            |
| Developmental attitudes .        | Rebellion and resentment leading to rupture with parents at adolescence                                                  | 81.6                                                                                                       | 1                            |
| Early relationships with parents | Resentment and hostility towards father                                                                                  | 68.2                                                                                                       | 1                            |
| School career . . . .            | Expulsion, frequent changes or truancy                                                                                   | 67.5                                                                                                       | 1                            |
| Adjustment in society. .         | Recidivism and repeated convictions. (Average number of convictions of all psychopaths was 7.4 and of all controls 3.0.) | 76.8                                                                                                       | 1                            |
| Job record . . . .               | Average period in job less than six months throughout total work period                                                  | 72.2                                                                                                       | 1                            |

These are simply some of the more definite tendencies which have emerged. Of some interest is the apparent failure of some others which were expected to yield positive information, to prove efficient in differentiating the two groups. For example, broken homes alone did not appear in our series to be more significant in leading to psychopathic behaviour than to



normal delinquency. Nor was there a clinical relationship between abnormal metabolic lability and the psychopathic state.

In view of the work of some American investigators into the association between abnormal findings in the central nervous system and psychopathy, special examination was made of the capacity for fine co-ordinated movement, for rapid and smoothly controlled alternative movements of pronation and supination in the forearms, for transient nystagmus and for inequality of the tendon reflexes without other discoverable pathological basis. Here again the hypothesis was that such anomalies would occur significantly more often in the psychopaths than in the controls. The figures actually obtained gave the following percentage distribution:

Controls displayed neurological anomalies in 25 per cent. of the 61 examined, psychopaths without head injury or epilepsy in 52 per cent., psychopaths with head injury in 46 per cent., and those with epilepsy in 36 per cent.

While the occurrence of these anomalies appears to be significantly greater in the psychopaths as a group, it is again of interest that they occur in the controls in virtually a quarter of the total number.

In the final presentation of these results it is hoped that it will be possible and profitable to break down the grouping of psychopaths along the lines originally forecast so that instead of contingency tables dealing simply with psychopaths as one group and controls as another, the significance of head injury and epilepsy, or the absence of such significance, may be apparent. In this communication however such differentiation has not been attempted in the clinical study or in the psychological and morphological study. These two studies can be presented at this stage only as a contribution to the problem of psychopathy as a whole by comparison with the control group. The differentiation was originally conceived as likely to be valuable most of all in the electrophysiological part of the investigation which follows.

*Results of Electrophysiological Study.* 149 subjects out of the total number of 165 originally selected were available for EEG study. The 16 who were not available had been transferred to other prisons or released before the investigation could be completed.

The relationship of EEG abnormality to the four clinical groups, normals, psychopaths, psychopaths with head injury and psychopaths with epilepsy, showed a significant positive correlation with abnormality on the part of the psychopaths as compared with the controls; the correlation being significant at the 5 per cent. level of confidence when epileptics and head injury cases were excluded, and at the 2 per cent. level when all psychopaths were grouped together.

However, when compared with many other samples of normals even

the normal criminal shows a surprisingly high percentage of E.E.G. abnormalities.

When the figures are broken down in relation to age there is a tendency for the percentage abnormality to fall with age and similarly, when the response to over-breathing was considered, it was found that at all ages the over-breathing response was more abnormal in psychopaths than controls, and that abnormal over-breathing responses were rare over the age of thirty.

The majority of the abnormalities of the E.E.G.s were of excess theta (4-7 cycles/sec.) activity mainly in the central areas. This, while occurring normally in young children, can be regarded as suggestive of physiological immaturity in adults. Of the other variants seen, only one will be mentioned at this stage:

Eight records showed an excess of beta activity (faster than 14 cycles/sec.) as well as theta. Only two of these were controls and one epileptic. It was our impression that several of these cases were alike clinically, in that they were of the "charming inadequate psychopathic" type.

From the clinical history taken various items were selected as providing indications of aggressiveness, neurosis, and emotional immaturity; inter-correlations were run between the clinical assessments of these personality features, and the results of constitutional, psychological, and electrophysiological studies. For example, 83 per cent. of these subjects displaying clinical evidence of severe aggressiveness had an abnormal E.E.G. record as compared with less than 50 per cent. of those without overt aggressiveness.

In contrast to this, of other symptoms considered, neither enuresis nor amnesia was significantly related to an abnormal E.E.G. Nor did the history of the family situation in childhood show any significant correlation with E.E.G. findings.

*Results of Psychological and Constitutional Study.* Of the total of 165 subjects examined, a random sample of 70, divided evenly between the controls and the two main psychopathic groups, were subjected to constitutional and psychological investigations. These consisted of capillary microscopy of the finger-nail fold, a test of intelligence, a study designed to assess emotional maturity and aggressiveness, and one concerned with the subject's neurotic tendencies.

Briefly the results of these additional investigations revealed that the mean intelligence level of all three groups was the same but the "neuroticism" score of both psychopathic groups was higher than that of the controls. "Aggression" was significantly more highly represented among the psychopaths than among the controls, the mean scores of both former groups being roughly double that of the latter. Emotional maturity, in similar fashion, was significantly less among the psychopaths than among the controls,

the mean score of the latter group in fact approximating to the score found in a large non-delinquent healthy population. Constitutional immaturity, as revealed by the technique of capillary microscopy, suggested developmental anomalies and dysplasias at the morphological level in 44 per cent. of the total number of delinquents examined, 81 per cent. of these belonging to one or other of the two psychopathic groups and only the remaining 19 per cent. to the controls. Capillaroscopy showed itself to be a useful ancillary diagnostic procedure, 66 per cent. of the subjects sampled being classified in agreement with clinical examination, by this means alone.

#### DISCUSSION

In surveying the results of these various approaches to the problem it is evident that of the vast number of points selected for inquiry in the clinical study a certain number do appear to have a significant and reliable relationship to psychopathy as diagnosed originally upon a purely impressionistic basis. By this is meant, not that the diagnosis was made casually or superficially but that it rested upon a survey of the individual at a particular point in his life in prison and was therefore a cross-section rather than a longitudinal view of the person as a whole. This is of course the basis upon which the diagnosis is commonly made in practice. The value of the detailed clinical investigation would seem to be that, taking this diagnosis as a starting point, a series of observations could be made on the individuals concerned which proved to have a consistently closer correlation with this diagnosis than could be expected to occur by chance alone more than once in a hundred times. It would seem therefore that a clinical profile can be constructed of the psychopath which is consistent for members of a certain group and which would justify members of this group being regarded as psychopaths when the definition of this term is made conditional upon a majority of the factors studied being present.

If this is so, the next step must be to inquire what correlation exists between the members of a group defined by these clinical methods and those who show abnormalities when studied electrophysiologically, constitutionally and psychologically.

The correlations adduced between these variables suggest that a failure to mature is the fundamental abnormality in the subjects selected as psychopaths in our investigation. This failure is equally evident in each of the three main fields of enquiry; it differs in no essential from that ascribed to psychopaths in general. This in turn suggests that, for the psychopath, criminal behaviour in its purely legal sense is almost irrelevant. Certainly criminality *per se* seems to add little to our knowledge of this particular form of character disorder, one of whose most striking general features is an



inability to accept authority in any form. That this inability derives in turn from a defect in the development of the personality often associated with a bad or inadequate relationship with the father has been repeatedly stressed when the general psychopathology of the condition is under discussion. While the developmental defect tends to diminish with age, it remains none the less true that neither in its effect, nor in its subjective experience, does time seem to mean the same to the psychopath as to the rest of his fellow men.

The sum of these approaches appears to us to add up to something like this: the psychopath studied in prison is a clinical entity distinct from other prisoners, whose characteristics can be defined by focusing upon his study the three main methods of approach just outlined. When a greater series of social studies of his background and family history are available it will probably prove possible to describe more fully the multiplicity of factors which clearly contribute to the development of his condition.

But the two questions which eventually research along these lines may be hoped to answer are firstly, how can the psychopath in prison be distinguished from all the other disturbed or neurotic fellow prisoners who may surround him, and secondly, what proportion of all prisoners are in fact psychopaths? The techniques we have tried to use, when developed and integrated, should provide the answer to the first question and from this the answer to the second should be readily available. The estimate which we have been led to make on a purely speculative basis to the second question is that about 5 per cent. of the population of convicted prisoners may prove to be psychopaths. This agrees on the whole with the impression of those prison medical officers with whom we have discussed the problem. If this is so, the argument for the provision of special facilities for further study and research devoted to this group of prisoners is very strong indeed. Such men, particularly when they are of the more explosive and aggressive types of psychopath, may create misery and havoc within the normal prison in which they are confined because their own violent and inevitable collision with prison discipline lead to reciprocal tensions and a natural hostility on the part of the overburdened prison officers which in turn may react upon the morale of the prison population as a whole. One case out of the 165 studied will serve as the briefest of examples; there could be many more.

This was a man of twenty-four with eight previous convictions whose present offence for which he was serving a sentence of five years' imprisonment was shooting at a policeman after a house-breaking attempt for which he was carrying a gun. This man's personal history included three admissions to mental hospitals for suicidal attempts. Of his relationship with his father he remarked, 'I don't speak to my father; he killed my mother . . .' By this he meant that his mother died as the result of an abortion which his

father insisted she should procure. His school and job record was characterized by frequent changes and his response both to punishment and to appeals was to become acutely tense and uneasy and to try in his own words, 'to break out, to get away, to hide out.'

His one solace was painting. In the course of examination he repeated over and over again, 'I'd be all right if I had my paints. . . . Why won't they let me use my paints. . . . If I can't do that I'll have to do something else.' An example of 'something else' which he felt compelled frequently to 'do' and which I confirmed with the prison officers in subsequent discussion, was to leap into the water tank while being allowed to take his exercise within the prison grounds. This simply added to his own discomfort and everybody else's trouble and it led on more than one occasion to a violent struggle when his rescue and the removal of his wet clothes was attempted. His destructive, impulsive, and wholly unprofitable outbursts were phenomena which, when comparatively calm, he could discuss with considerable insight. He knew he upset not only himself but everybody else and he knew that because of his behaviour it was sometimes difficult for the other prisoners to feel safe with him or for the prison officers to allow to the whole group a degree of latitude to which they might otherwise have attained.

The repercussions of this man's behaviour and attitude were in fact disastrous for himself and for everybody else. He was a classical example of the impulsive, aggressive, explosive psychopath whose clinical rating, E.E.G. findings, and morphological state were all characteristic. If he could have been studied and treated in a special institution within the penal framework, of the kind repeatedly suggested but not yet achieved in this country, everyone would have been relieved and he might have benefited.

#### CONCLUSIONS

We believe that the results of the investigation on which this communication is based will provide evidence:

- (1) That the psychopath in prison can be distinguished by a combination of studies such as we have undertaken.
- (2) That the size of the problem uncovered in this way will support the proposal for further research in a special institution.
- (3) That until such research can be undertaken, the problem of treatment and management of these patients is likely to continue to be far more costly and far more difficult than is at present generally understood.

It is, of course, inevitable that the provision of special institutions would tend at least in the beginning to lead to the despatch thereto of numerous prisoners who were not psychopaths but who for various other reasons

provided problems of management and morale; for example, some homosexuals and prisoners who were on the borderline of mental illness without being certifiable. The policy with regard to this complication would have to be worked out. Such individuals need and deserve consideration as much as anyone else but their recognition and definition is perhaps not as difficult as is that of the psychopath. As a grossly disturbed individual whose problem goes beyond even his own stability and control the psychopath needs and demands full, accurate, and objective study. It is our hope and belief that this project provides a further step towards that definition which is indispensable to productive research.

#### ACKNOWLEDGEMENTS

The original proposal to undertake a research project of this kind was suggested by Dr. Denis Hill, of the Department of Electro-Physiology, Institute of Psychiatry, University of London, and preliminary arrangements were made by him with Dr. H. P. Young of H.M. Prison Commission. The work of two of us (D. S-C. and J. W. L. D.) was undertaken while on Fellowships granted by the Nuffield Foundation.

We are grateful for the co-operation and encouragement of the Prison Commissioners, and are indebted to them for permission to publish this article; but permission does not imply that it represents their views.



The blind accumulation of facts uninformed by any hypothetical interpretation of what is so industriously recorded is a barren enterprise; and it is particularly futile when the data themselves are already largely matters of common experience. A mere rearrangement of classification of what is already known is not in itself necessarily a significant addition to knowledge. But whatever effort may have been wasted in this way, the habit of noticing too much rather than too little is, after all, a fault on the right side. Particularly in the early stages of a science the exploration of blind alleys is to be expected; if you are completely lost, it is not a bad plan to try to make a note of nearly everything that you can see. After a time, something that makes sense may emerge from some region of what till then looked like complete confusion.

BARBARA WOOTTON: 'Testament for Social Science'.  
(London: Allen & Unwin, 1950, p. 26.)



# AGGRESSIVE PSYCHOPATHY IN ONE OF A PAIR OF UNIOVULAR TWINS: A CLINICAL AND EXPERIMENTAL STUDY<sup>1</sup>

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## INTRODUCTION

The study of identical twins in order to assess the effects of environment on persons of the same genetic constitution is a research method which has been used frequently in psychiatry since it was suggested by Galton in 1875. There have, however, been few papers written on the study of psychopathic personality by this method. Lange (1930) recorded the criminal histories of thirteen pairs of monozygotic twins.<sup>2</sup> Ten of his cases showed concordant histories. Of the three pairs in whom only one of the twins had a criminal record two had suffered brain injuries. In the third case there were endocrine differences, the non-criminal twin having a goitre. From these cases, and the evidence from seventeen cases of dizygotic twins,<sup>3</sup> Lange concluded that heredity played a large, though not exclusive, part in the causation of crime. However, his criteria of diagnosis of monozygosity are loosely defined, consisting of physical resemblance, photographs, fingerprints and exact physical measurements, the latter, however, not being cited. Rosanoff (1936) studied a much larger twin sample of 340 adult criminals, juvenile delinquents and children showing behaviour difficulties. His results show again the striking difference between the monozygotic and dizygotic twins in all three groups. In the male and female adult group, both identical twins were psychopathic in a much larger proportion of cases than among the dizygotic twins. In instances where only one twin had been associated with crime, the twins were in most cases dizygotic. In the small group of discordant monozygotic twins, head injury was given as one of the causative factors in personality differences. The juvenile delinquents and behaviour problem children show similar results. In this study, the authors do not

<sup>1</sup> I would like to thank Professor A. J. Lewis, Dr. Emanuel Miller and Dr. D. L. Davies, Institute of Psychiatry and Maudsley Hospital, London, for their encouragement and advice; Dr. E. Slater (Maudsley Hospital) for allowing me access to an unpublished manuscript and for carrying out the finger-print analysis, and the Director of National Physical Laboratory (spectrophotometric tests of the hair samples). I am indebted also to the following for their assistance in some of the special investigations: Mr. M. Falconer (Guy's-Maudsley Neurosurgical Unit); Dr. R. R. Race (blood grouping); Dr. D. Pond (E.E.G.); Dr. J. L. Lovett Doust (spectroscopic oximetry and capillary microscopy); Miss M. Israel, Mrs. S. Eysenck, Mr. D. Schonfield and Mr. J. Shields (psychological testing) and Dr. P. Sainsbury (electromyography).

<sup>2</sup> Twins derived from one fertilized ovum.

<sup>3</sup> Twins derived from two separate ova fertilized at the same time.

record their method of establishing monozygosity. Rosanoff concludes, as did Lange, that heredity is an important factor in the ætiology of crime.

A. M. Legras in Holland in 1932 (quoted by Rosanoff (1936) ) published data on nine pairs of criminal twins. Of these, four pairs were monozygotic and five were dizygotic. In all four of the monozygotic pairs, both twins were psychopathic, whereas in the other five pairs only one was affected. From this data he concluded that there was an hereditary factor in the causation of criminality.

Further mention of criminality in one of a pair of twins came from Healy and Bronner (1936) who observed personality differences in eight pairs of dizygotic twins reared in the same homes. These differences, they concluded, were due to environmental influence. Here again, no criteria for the diagnosis of dizygosity were given.

In Dr. E. Slater's study, 'Investigation of Psychotic and Neurotic Twins' (as yet unpublished), among nine uniovular twins in which the propositus suffered from a neurotic or psychopathic illness, in only two pairs were the life histories concordant. In neither of those did psychogenic or environmental factors play a significant role. In the uniovular twins showing dissimilar histories, environmental influences were important. He made the observation 'that the paths of uniovular twins may diverge only very slightly at first, but may eventually lead to entirely different circumstances, and that the consequence of one false step may lead by a vicious spiral to a progressively lower niveau'. He also states that the personalities of uniovular twins often showed marked differences in respect of energy of character; the more dominant twin in the psychopathic group appeared to make a less satisfactory adjustment. The fact was also noted that the less intelligent twin was more likely to develop a psychopathic illness.

The present study consists of the investigation of a single pair of twins. Though general conclusions cannot, of course, be drawn from a single case study, the investigation may be of interest as, unlike many larger studies, where restrictions are of necessity imposed by the bulk of the material, in the present case full psychiatric and physical examinations were made on both twins and investigations were carried out by several specialized hospital departments.

#### CASE MATERIAL

The patient, H. M., aged twenty-seven, was admitted to hospital for the investigation of long-standing aggressive behaviour. The case was of interest because he was one of identical twins, whose life history appeared to have differed markedly from that of his brothers. It was decided that in view of this divergence, a parallel investigation should be made of both twins.

The time which could be allotted by the normal twin for our investigation was limited by the fact that he could only be expected to come to hospital a few times. Both brothers submitted to psychiatric interviews and a physical examination.

A diagnosis of monozygosity was made on the following results of investigations:

(1) *Physical Likeness.* (a) The eye colour, as determined by an eye colour scale, was similar. (b) The hair colour was slightly different, the patient's being a darker brown. The hair appeared to be thinning in the same way. (c) The skin colour was the same. (d) Similar gait and gestures. (e) Both brothers took the same size in shoes. (f) Similar body hair distribution. (g) Both showed a similar type of colour blindness on the Ishihara test. (h) Both were ambidextrous.

(2) *Similar Cranial Measurements.* The antero-posterior diameter, the lateral diameter, and circumference of the head were all similar. A difference of 0.5 cm. was noted in the chin to hair margin measurement, the patient's face being the longer. The interpupillary distance, the bitemporal diameter and the depth of the nasal root at the bridge were all slightly greater in the normal twin, and the distance from the external auditory meatus to the nasal root was slightly less. The patient was half an inch taller and ten pounds heavier than his twin, and his arm span was half an inch greater.

(3) *Both gave a history of being mistaken from childhood.* When they were small they could not be recognized apart, although the patient had a hæmangioma<sup>4</sup> on his left cheek from birth which grew larger as he became older. They wore ribbons of a different colour to distinguish them. At school they were separated to different sides of the classroom and were often mistaken by friends. In the Army, their resemblance produced incidents of misidentification, and even at the time of his entry to hospital, the patient stated that there were occasions when his foster-mother failed to distinguish between them. Both brothers said that they had experienced telepathic feelings concerning each other since they were children.

(4) *Taste Reactions.* Both claimed that phenylthiocarbamide was a bitter-tasting substance.

(5) *Blood Groupings.* They had eight similar blood groups: A<sub>2</sub>, R<sub>1</sub>R<sub>2</sub>, MsMs, P +, Le(a - b -), K -, Lu(a -), Fy(a +).

(6) *Fingerprint Analysis.* This was carried out by Dr. E. Slater, who reported that they were typically uniovular.

(7) *Electroencephalograms* showed an identical resting record with the alpha rhythm at 10-11 c/sec. appearing more on the right side than the left and blocking well on both.

<sup>4</sup> Congenital abnormality of the blood vessels of the skin.



(8) *Hair Samples.* These were submitted to the National Physical Laboratory where records of their spectral reflectance for visible radiation of wavelengths between 0.4 and 0.7 microns were obtained with a Hardy recording spectrophotometer. These curves were compared by Mr. J. E. Reed with the curves of three pairs of 'reputedly monozygotic twins' in his own data. On this basis he thought it unlikely that the hair samples under investigation were from identical twins. Several qualifications must, however, be made to this statement. Firstly, it was impossible to guarantee that the hair samples were taken identically from our twins' heads as only one of the samples was taken in hospital. For purposes of examination the whole length of the hair is required. Only the tips were used in our case. Secondly, there is a demonstrable environmental effect upon hair colour; the normal twin has been out of doors more during his life than his brother, and, as would be expected, his hair is the lighter. Thirdly, in none of Reed's twin pairs was monozygosity unequivocally established. Fourthly, there are too few twin pairs available for rigorous statistical tests to be made to determine whether or not the data from our twin pair are significantly different from that of Reed's three pairs. For these reasons, and taking into account the remaining evidence for monozygosity considered in this section, the slight divergence of hair colour in our twin pair can not be considered as in any way sufficient evidence to refute the establishment of monozygosity.

#### SOCIAL HISTORIES OF THE TWINS

The twins are twenty-seven years old. The details of their birth are scanty. Normal delivery occurred at home and they were full-term babies. The patient was born one hour after his brother and weighed a pound more. The number of placentæ was not known. As far as can be ascertained they were bottle-fed and their infantile development was identical.

There were five children in the family and the twins were the second youngest. The father, who was moody, erratic, bad-tempered and alcoholic, saw very little of the twins after they were four years of age. He never physically ill-treated the children and favoured neither of the twins. However, in their retrospective accounts, the patient remembers him bitterly as being a cruel father, in comparison with his brother's recollection. Their mother died of puerperal fever following the birth of her youngest child. Relatives state that she was a quick-tempered woman who kept a cane beside the children's cot to smack them over the fingers when they cried. As far as is known, similar punishments were meted out to both children. In spite of this early upbringing the patient has an idealized picture of his mother as a gentle and kind woman. Of the three other siblings the eldest

sister is known to be quick-tempered and the youngest is a timid nervous girl with a lisp.

On the mother's death, when the twins were fourteen months old, it was decided that they should be cared for in separate homes by the two aunts. When they had been parted for one day, the normal twin became very upset, and it has been said that he had a convulsion, but there is no accurate information to substantiate this statement. They were reunited, and never again separated in their childhood.

When they were two years and four months old, their father remarried and took the children away from his sister to live with him. This marriage was unhappy, and their stepmother left her husband after a few months. She neglected and ill-treated the twins, and they were returned once more into the keeping of their father's sister. For some time their father also lived with her, but when the twins were four years old he went to ranch in Canada for eleven years.

Their foster-mother was a widow with five children of her own. She was a kindly, religious woman who brought them up firmly but never used physical punishment. Both brothers feel that she was inclined to favour the patient.

They started school when they were five years of age, and showed similar scholastic records, the patient doing not quite so well as his brother. Different subjects, sports and friends interested them, and the patient grew up to be the more solitary boy.

When six they both contracted scarlet fever and were sent to an Isolation Hospital together. During convalescence the patient became very troublesome, and incited the other children to indulge in a fight. He and his twin brother, though frequently together, fought a great deal and the patient experienced feelings of hate towards his twin brother from an early age. He told lies about him to his foster-mother, and committed various mischievous acts which he would later deny. Temper tantrums were noted from an early age, and when they were ten years of age the twins fought over the possession of an air pistol which discharged, injuring the normal brother's lower lip. From an early age it was noted that the patient was the leader of the twins. He was more heedless of restraint, and when corrected his temper would smoulder and finally express itself in some naughty act. The other twin, on the other hand, was quicker to answer back to authority verbally, was more cautious in action, disliked and avoided fighting at school and was more given to save his money.

When he was eleven, the patient endured a head injury on falling from a tree. He lost consciousness for a few seconds, felt dazed for half an hour but walked home and felt no after-effect. He was twelve when he had his

second cranial trauma, when he was tossed from a tub in a river on to the rocky banks. He regained consciousness while being taken home and recovered immediately. Though the twins have a practically identical record of physical illness, in that year the patient had a throat abscess, during the course of which he experienced high fever and was delirious. The only other illness the patient had in childhood was a recurrent swelling of the small joints of his fingers when aged ten or eleven. This condition was never medically examined.

When they were fourteen the twins left school and became butchers' messengers in different shops. The normal twin started to learn to box at this time, a pastime he carries on to this day. After one year in this occupation, the patient ran away to the Army, forging his foster-mother's signature on his Army papers. Six months later he was joined by his twin brother, who persuaded his cousin to sign his papers. They were vaccinated on entry to the Army, the patient remembering that he had a subsequent axillary lymphadenitis<sup>5</sup> and sore eyes. That year he injured a man's leg with a penknife, when the man hit him on the back of his head with a ruler. The patient's first offence of absence without leave occurred one year after entry to the Army. When he was seventeen he deserted again for two months, taking with him a gang which he had organized, including his twin brother. He received 98 days' detention for this offence. During that year he also tried to attack his brother with a stiletto, but the attempt was foiled. He suffered from another head injury the same year, when circling in a roundabout at a fair. He got up out of his seat and jumped thirty feet to the ground. He was unconscious for several minutes.

The twins separated to different parts of the country when they were seventeen. The patient continued his turbulent career, and one year later was sentenced to one day in prison for larceny. He had one further head injury when he was nineteen, when a hand grenade accidentally exploded near him. That year he was investigated for epilepsy after a confusional episode in which he broke some furniture in a café. He had no further attacks in hospital, and was discharged after one month.

The patient married when he was twenty. His wife, who was four years younger, was a liar and a thief, and was herself convicted by a court for theft. They were unhappy together and separated seven years later after she had been unfaithful. He states that he has strict moral standards in the sexual sphere, and has never lived with any other woman. Following his marriage he was convicted for a jewellery theft. He gave his brother a watch and asked him to help him pawn the stolen goods without revealing the source to him. This his brother did, and was convicted as an accessory

<sup>5</sup> Inflammation of the axillary lymph glands.



after the fact. A few months afterwards the normal twin went to Europe as a stretcher-bearer, was mentioned in despatches twice and discharged with the rank of corporal. He experienced much heavy fighting and was well recommended on leaving the Army. During his Army career he became a successful flyweight boxer and was concussed for a few minutes in 1947. He married during this time and his wife is stable and happy. Since 1944 he has experienced infrequent attacks of unconsciousness in which he complains first of severe epigastric pain and then becomes unconscious. The attacks, which occur about twice a year, appear to be precipitated by increased worry and are subsequently not recalled by the subject.

The patient's career in the Army ended in 1946 when he was discharged as a psychopathic personality after a term of one year's imprisonment for assault and attempted robbery. In his Army career he had deserted ten times and had two further convictions for theft.

His work record deteriorated on leaving the Army, as evidenced by reports from his employers. He tried various occupations and received two more sentences for theft. His wife left him in 1950, and he attacked her when she revisited him, subsequently giving himself up to the police. Later he attempted to commit suicide by taking twenty aspirins, and when divorce proceedings were contemplated he fled to London, a journey of which he has no recollection. He had a few jobs in London before visiting the Hospital, subsequent to an episode of clouded consciousness, after drinking a pint of beer. When medically examined during this attack, his confusion appeared largely simulated, and the examination revealed no physical abnormality.

Since discharge from the Army in 1948 the normal twin has been a grocer's assistant for two years in a country store. His work position is improving and he is keen to do well.

In accounts of their personalities, the twin brothers show marked differences. The patient has no friends, and he soon tires of acquaintances whom he makes easily; he is described as being cold-hearted, selfish and unpredictable; he never heeds advice; borrows money, is dishonest, and a shiftless worker; he shows no affection or consideration for anyone—even his four children, for whom he has never accepted responsibility. His brother is steady, stable, modest, less quick-tempered and more ambitious. In contrast to his brother's agnosticism, he recently joined the R.C. Church.

In taking a psychiatric history, their differing approaches to questioning was noticeable. The patient's story varied from time to time, but when confronted with these discrepancies he revealed no confusion. His brother discussed frankly all details about his history, and co-operated obligingly

in all the tests. On physical examination, the patient's expression was slightly more immobile. He has an eczema of his right arm and leg, and a cutaneous hæmangioma of his left cheek, which was treated when he was twelve with carbon dioxide snow. His brother has a mild degree of myopia, and an infrequent facial tic.

#### SPECIAL INVESTIGATIONS

(1) *Electroencephalograms* were carried out on the patient and his twin.

The records were done with an automatic analyser, their blood sugar levels being respectively 85 and 87 mgm. per cent. The resting records were for all practical purposes identical. The alpha rhythm was at 10-11 c/sec. appearing more on the right than the left and blocking well on both. There was a tendency for more central theta to appear in the patient than in his brother. The over-breathing responses were strikingly dissimilar, the patient's being quite unstable and delta activity becoming the dominant rhythm. His brother's record remained stable, but unfortunately the over-breathing responses could not be repeated. The responses to photic stimulation also differed in the range 13-16 c/sec., when the patient tended to follow at the fundamental and then half the driving frequency, whereas his brother reverted to his intrinsic alpha rhythm. A total of 2.5 c.c. of metrazol was given to the patient and his brother. In the patient it produced some definite spikes with a flickering light at 18 flashes/sec., and in his brother it produced spikes and one definite myoclonic jerk with a flickering light of the same frequency. On this second occasion when the metrazol was given, the patient's blood sugar was 107 mgm. per cent., his brother's remaining the same. In spite of the differences of blood sugar levels on the later records, there was practically no difference between the records. On one other occasion when only 1.5 c.c. of metrazol was given to the patient, and his blood sugar was 89 mgm. per cent., doubtful spikes were produced.

It was considered that the twins showed an abnormally low threshold to metrazol, and that the attacks described by the patient's brother were epileptic in character.

(2) *Psychological Tests.* These and the reasons for giving them, fall into three groups:

(a) *Cognitive Tests.* It was necessary first to eliminate the possible importance of differences in intelligence between the twins.

On the Wechsler-Bellevue individual intelligence scale scores were as follows (normal twin's scores in brackets):

Full Scale I.Q.: 113 (107).

Verbal Scale I.Q.: 114 (115).

Performance Scale I.Q. : 109 (96).

Thus the full scale I.Q. of the normal twin is 'average', that of his brother is just 'above average'. On the verbal scale their scores are practically identical and on the performance scale, although the patient is higher than his brother, both scores fall within the 'average' range. Intellectually, therefore, it would seem that both twins are of similar capacity. The difference in intelligence is unlikely to be an important causative factor in the personality differences between the twins.

(b) *Projective Tests.* These were administered with both general and specific queries in mind. The general reason was to provide a personality picture of the twins to supplement that obtainable from the clinical interview. It was felt that, especially with the normal twin to whom only one interview was given, the projective tests might provide additional material of value. More specifically, information was wanted on whether, in a standard situation, the abnormal twin would vary, in the expected directions, from the normal twin on indices indicative of degree of control of aggression, degree of emotionality and ability to deal with social situations. The following tests were administered to both twins: Rorschach Ink Blots, Thematic Apperception (T.A.T.) and Word Association.

On the Rorschach, it was reported that, on the assumption that both twins have fundamentally the same basic temperamental make-up, the differences in the methods by which they deal with their environmental stresses is most striking. On the one hand, the patient reacts by inhibition of his anxieties, an attempt at complete control of his emotions, a withdrawal from social situations and, when these attempts are unsuccessful, there is an 'explosive' response. The normal twin, on the other hand, is able to project his emotions into his fantasy life and to cope with a normal social situation without having to inhibit his aggressive impulses.

On the T.A.T. it was suggested that the patient's fantasy, concerned as it is with heroes having high ideals, good character and successful professional careers, is in the nature of wish-fulfilment. In contrast, the general impression from the record of the normal twin is that he is projecting a reasonable, realistic and normal view of life and has not the patient's fantasy of success beyond his capabilities nor or an inescapable hard fate.

On the Word Association Test the patient showed the kind of disturbances which were predicted in view of his past history (*i.e.* connected mainly with his wife, but also with his twin), whereas the normal twin gave a very normal test result.

The projective tests, then, were successful in confirming the general personality pictures of the twins gained from the clinical interviews and also in elucidating and confirming areas of emotional disturbance in the abnormal as compared with the normal twin.



(c) *Objective Personality Tests.* These were administered in order to check specific hypotheses derived from the clinical literature as to the direction in which the psychopathic twin would vary from his normal control.

On written tests of 'neuroticism' (the Sutton Neuroticism Booklet which contains such sub-tests as number of anxieties, annoyances, a neurotic inventory, etc.) the psychopathic twin's score is considered as 'typically neurotic', the control twin's score is 'typically normal'. Interestingly enough, on the Body Sway test of suggestibility both records were very similar and neither was judged to be 'neurotic'. A possible explanation of this discrepancy is based on the finding of Eysenck and Prell (1951) that individual variability on the Body Sway test, but not on written tests of neuroticism, seems to be largely determined by hereditary factors. It may be, therefore, that, although neither twin is innately high in 'neuroticism', the neurotic score of the abnormal twin on the written tests of neuroticism is a true reflection of his present degree of abnormality and may be due to factors that, between birth and time of testing, have affected him but not the normal control twin.

On the test of leg persistence, scores varied in the expected direction, the psychopathic twin being less persistent (1 min. 41 sec.) than his brother (3 min. 7 sec.).

The A-S Reaction Study, (Allport 1928), a written test designed to measure a person's tendency to be ascendant or submissive, was also administered in order to check an interesting and specific suggestion made by Slater (as yet unpublished) that, in the case of psychopathy in one of a pair of identical twins, the abnormal twin tended to be the more dominant. The hypothesis was confirmed: the score for the abnormal twin (+ 30, 1st decile) being decidedly more ascendant than that of the normal twin (+ 7, 4th decile).

In summary, the psychological testing confirmed that, despite a similar intellectual endowment, there are gross personality differences between the twins; it indicated further the specific directions in which these variations exist and made objective measurement of these differences possible.

(3) *Spectroscopic Oximetry.* Both twins were subjected to a short psychiatric interview, during the course of which the percentage arterial oxygen saturation was estimated from a measure of the mean reduction time by the method described by Lovett Doust (1951). During most of the interview the patient displayed a level below the critical range of functional normality, the lowest levels being reached when such topics as his twin brother, parents and wife were broached. His brother, on the other hand, gave a response within the normal range, and did not react abnormally to any of the topics discussed.

(4) *Capillary morphology*, as visualized using the finger nail fold, was examined. There was little resemblance between the two records. In the patient's case there was a much heavier loading of dysplastic constitutional elements, as compared with his brother's record.

(5) *Electromyography*.<sup>6</sup> Recordings were obtained from both twins. These were considered to be of interest because of the patient's complaint of episodic feelings of tension in his muscles. The levels of tension while resting were not found to be markedly different. The patient produced greater neuromuscular tension responses to certain topics with consistent regularity. These topics concerned his feelings towards his wife or his twin. His tension was also more labile. The normal twin produced signs of neuromuscular tension more easily than normal people, and also on aggressive topics, consisting, not of personal relations, but on his hobby of boxing. The patient's tension, once aroused, subsides with difficulty, but the normal twin relaxes quickly on request.

(6) *Other Investigations*. A blood Wassermann reaction and skull X-ray were performed on the patient and were normal. In view of the possibility of the patient suffering from a Sturge-Weber syndrome<sup>7</sup> a neuro-surgical opinion was sought, but no organic cerebral condition was considered to be the cause of his aggressive outbursts.

#### DISCUSSION

From the psychiatric histories and various psychological and other tests which have been presented, several facts emerge. The evidence shows that we are dealing with a pair of uniovular twins who, though reared in the same environment, manifest personality differences. These differences appear in their divergent work, social and marital records. On psychological testing the patient shows a more aggressive, immature personality, with an inability to cope with social situations. His level of aspiration is high, but he lacks the persistence to carry his ideals through to fruition. His poor physiological response to stressful situations is proved by his oximetric recordings, and the electro-myographic studies show how emotionally charged topics produce a higher level of tension in him than in his twin brother.

The electroencephalograms require fuller mention. The attacks of unconsciousness in the normal twin, in the light of the low threshold to metrazol, are probably epileptic. The patient's record is similar, apart

<sup>6</sup> The recording of electrical activity in muscles.

<sup>7</sup> Hæmangioma of face, associated with a venous angioma of the cerebral cortex of same side.

from the overbreathing response, which it would have been desirable to repeat in his brother's case. The evidence for associating electroencephalographic findings in aggressive psychopaths with epileptic cerebral pathophysiology was presented by Hill (1944). He showed that 17 per cent. of epileptics with major convulsions, 16 per cent. of cases with minor convulsions and 37 per cent. of cases with psychomotor attacks had the same type of record as 61 per cent. of dysrhythmic aggressive psychopaths. The differences and similarities which distinguish the two groups cannot yet be fully decided. Williams (1944) also mentions the close connection between epilepsy and aggressive psychopathy, and states that the diagnosis of epilepsy should be reserved for those cases having fits. He suggests the term 'latent epilepsy' for those cases showing paroxysmal transient outbursts but no fits, a term which might be applied in this case. Further mention of the close alliance between epilepsy and psychopathy comes from Hill and Watterson (1942), who found a small number of aggressive psychopaths who had experienced fits in childhood which had ceased. All had abnormal electroencephalograms. Another finding of Hill and Watterson was that among aggressive psychopaths a greater incidence of bad temper and epileptoid conditions were found among the first degree relatives in the group of aggressive psychopaths than in the inadequate psychopaths. Kinnier Wilson (1940) also mentions occasional bouts of bad temper in epileptic families which he felt supported the theory of genuine epileptic equivalents.

It would seem that in the present instance the twins began their lives with a similar temperament, apart from the possibly greater dominance and aggressiveness of the patient. Their paths began to diverge noticeably before ten years of age, and after their varying Army careers and different marital histories, their lives became totally unlike.

One may question next the reliability of the diagnosis of monozygosity of the twins. Unfortunately it was not possible to obtain blood samples from the parents, and there must still be slight doubts. We felt, however, that with the methods available we were justified in calling these twins identical.

It might be argued that these twins were oocytic,<sup>8</sup> the concept postulated by Dahlberg and von Verschuer (quoted by Slater, unpublished). These twins would only tend to resemble each other to a greater degree than binovular twins, and only in exceptional cases would they be so alike as uniovular twins.

To account for the social and psychological differences between this pair of identical twins, a closer scrutiny of the various environmental factors which might be responsible is necessary. The importance of intra-uterine influences has been stressed by Newman, Freeman and Holzinger (1937),

<sup>8</sup> Twins derived from the fertilization of a single ovum and its polar body by two sperms.



who discussed the effect of inequality of the blood supply through the placental circulation. It was their general impression that one twin was usually physically inferior and less vigorous, and they mention the observation of Schatz that during the middle of pregnancy the size of the foetuses differs more in monozygotic than dizygotic twins. These authors also mention the asymmetry mechanism and partial asymmetry reversal as the possible cause of differences in identical twins, but considered that it was impossible to determine whether the mechanism affected any character other than those of the asymmetrical sort. Penrose (1949) also mentions that some development processes are asymmetrical.

Birth details are scanty in this case and it is possible that, due to the delay between the births, the patient may have been subjected to anoxia.<sup>9</sup>

In childhood the patient suffered a series of head injuries and a feverish illness in which he became delirious. None of the injuries was very serious, and it is noted that even before the first injury occurred the patient was showing evidence of mischievous and more aggressive behaviour.

Differences may have occurred in the parental attitudes towards the twins, but as far as we were able to determine their psychological environment was almost identical, and after the age of four, the patient appears to have had the more benign treatment from their foster-mother. One might ask if her moderate attitude was an over-reaction to a previously more severe one. However, it is virtually impossible to reconstruct the evidence concerning the finer nuances of paternal attitudes. The introspections of the patient seemed to have little veracity or worth. It might be proper to speculate on the part played by the hæmangioma in determining the equality of attention which each child received. Though we are told by the patient and his foster-mother that in his life the presence of the hæmangioma caused him no embarrassment, it would be surprising if it had so little effect.

Another important point which seems pertinent in this case was discussed by Newman *et al.* (1937). They noted the fact that one twin usually took the lead in social intercourse, the other following. This slight initial difference might produce an habitual difference in attitude and behaviour, which would grow out of their intimate association together. Each twin was part of the environment of the other, and a part which differed increasingly as their paths began to diverge. If the patient was much more of a leader than his brother, though initially their basic personalities were similar, and if by being persistently more aggressive he incurred a more hostile attitude to those in authority, a rivalry would originate between the two brothers, which would cause a further widening of the gulf between them. This theory might be partly substantiated from the introspection of the patient.

<sup>9</sup> Deficient supply of oxygen to the body tissues.

## SUMMARY AND CONCLUSIONS

The case has been presented of an aggressive psychopath whose life history appears to have shown a marked divergence from that of his twin brother. The results of various special investigations have confirmed the observable personality differences between the twins. Some of the complexities implied by the use of the twin method have been discussed. Hypothetical arguments have been advanced to account for the personality differences.

This case would appear to yield evidence contradictory to the results of previous studies where hereditary factors have been considered to be of particular importance in the causation of crime. Here environmental factors seem to be of greater importance, factors possibly which have had their effect in the very early years of life. Such a conclusion forces us to emphasize the difficulties of drawing unequivocal conclusions from twin research.

## REFERENCES

- (1) ALLPORT, G. W. 'A Test for Ascendancy-submission', *J. Abn. and Soc. Psychol.*, 1928, **23**, 118-36.
- (2) EYSENCK, H. J., and PRELL, D. B. 'The Inheritance of Neuroticism: An Experimental Study', *J. ment. Sci.*, July, 1951, **97**, 441-65.
- (3) HEALY, W., and BRONNER, A. F. 'New Light on Delinquency and Its Treatment.' London: Geoffrey Cumberlege, 1936.
- (4) HILL, D., and WATTERSON, D. 'Electro-encephalographic Studies of Psychopathic Personalities', *J. Neurol. Psychiat.*, 1942, **5**, 47-65.
- (5) HILL, D. 'Cerebral Dysrhythmia: Its Significance in Aggressive Behaviour', *Proc. R. Soc. Med.*, 1944, **37**, 317-30.
- (6) KINNIER WILSON, S. A. 'Neurology.' London: Arnold, 1940.
- (7) LANGE, J. 'Crime as Destiny.' English translation. New York: Allen and Unwin, 1930.
- (8) LOVETT DOUST, J. 'Studies in the Physiology of Awareness: Oximetric Evidence of the Role of Anoxia in Certain Psychiatric States', *Proc. R. Soc. Med.*, May, 1951, **44**, 347-52.
- (9) NEWMAN, H. H., FREEMAN, F. N., and HOLZINGER, K. J. 'Twins: A Study of Heredity and Environment.' Chicago: Univ. Chicago Press, 1937.
- (10) PENROSE, L. S. 'Biology of Mental Defect.' London: Sidgwick and Jackson, 1949.
- (11) ROSANOFF, A. J., HANDY, L. M., and ROSANOFF, J. A. 'Criminality and Delinquency in Twins', *J. Criminal Law and Criminol.*, 1934, **24**, 923-934.
- (12) SLATER, E. 'Investigations of Psychotic and Neurotic Twins.' (As yet unpublished.)
- (13) WILLIAMS, D. 'The Nature of Transient Outbursts in the Electro-encephalograms of Epileptics', *Brain*, 1944, **67**, 10-37.

## RESEARCH AND METHODOLOGY

### CURRENT RESEARCH. XVII. ELECTRO-ENCEPHALOGRAM AND DELINQUENCY

(1) *Name of University Department supplying the information:* Joint Department of Psychological Medicine, Royal Victoria Infirmary and King's College Medical School, University of Durham, Newcastle-upon-Tyne, 1.

(2) *Subject of Research:* Electro-encephalogram and Delinquency.

(3) *Under whose auspices is the research being carried out?:* Professor Kennedy.  
*Research Workers:* Professor Kennedy, Mr. J. W. Osselton, Miss Joan Farrall.

(4) *When commenced and when likely to be completed?:* Will commence shortly. Likely to be completed when a suitable number of cases have accumulated.

(5) *Have any results been published and where?:* Nothing so far published.

### PROJECTED RESEARCHES ON THE ALLEGED PREVENTIVE EFFECT OF CAPITAL PUNISHMENT AND ON METHODS OF PREVENTION OF CRIMES OF VIOLENCE

On May 4, 1950, Dr. Edward Glover, Chairman of the Scientific Committee of the Institute for the Study and Treatment of Delinquency, submitted on behalf of the Institute a memorandum to the Royal Commission on Capital Punishment, and gave oral evidence before the Royal Commission.<sup>1</sup>

Both in his memorandum and in oral evidence Dr. Glover drew the attention of the Royal Commission to the problem of psychopathy. Emphasizing the importance of this problem he stated: 'Many crimes of violence are the result of pathological conditions which, although not recognized under the M'Naghten Rules, are nevertheless characteristic forms of mental disorder capable of great improvement, sometimes of cure, by scientific processes of treatment. This applies particularly in the clinical group described as the psychopathic states, in which crimes of violence, both sexual and non-sexual, are a common feature.'

From the recognition of the importance of psychopathy in crimes of violence, including murder, two problems emerge.

Firstly, there is the problem of early detection and treatment of this condition. The Memorandum makes clear that 'it is a general rule that in cases of pathological outbursts of violence it can be established that disordered acts of the same kind have occurred in early childhood'. 'If sufficient trouble were taken pathological cases liable to commit murder could be detected during early childhood; in other words pathological murder is potentially preventable, or, at least, the tendency can be detected at a time when measures of prevention can be taken.' Dr. Glover suggested that the early diagnosis and treatment of potential murderers could be dealt with by an adequate service of child psychiatry; this 'would strike seriously to the root of the problem of murder and its prevention' (oral evidence, p. 501).

<sup>1</sup> Both the Memorandum and the Minutes of Evidence have been published by His Majesty's Stationery Office: 'Minutes of Evidence Taken Before the Royal Commission on Capital Punishment'. No. 21, Twenty-first day, Thursday, May 4, 1950.



Secondly, there is the problem of deterrence. It has been found that in most pathological cases the threat of punishment is not deterrent, and in some instances acts as an additional incentive to criminal conduct. In some instances the accounts of executions given in the press have been found to have deleterious effects on the delinquents under treatment, who become more negativistic to psychotherapy and more prone to relapse. On the other hand, the experience of the Institute for the Study and Treatment of Delinquency has shown that the pathological group to which some murderers belong can be dealt with by suitable scientific treatment along medico-psychological and social lines. It has also been found that the particularly important psychopathic group, often regarded as intractable, is almost as amenable to treatment as the psycho-neurotic group, provided the treatment is maintained for a long enough period. A statistical analysis made by T. Grygier of 2,079 consecutive cases of both sexes treated at the Portman Clinic (I.S.T.D.) showed no significant difference between the two groups with regard to responsiveness to treatment (memorandum, Appendix C).

The most important conclusions of the memorandum were:

- (1) The problems of murder and of capital punishment have not yet been subjected to a satisfactory scientific examination such as would be considered essential in the case of problems of natural science, medical science and psychological science.
- (2) Such reliable evidence as exists points to the necessity of subjecting these problems to an exhaustive scientific examination.

These conclusions seemed to be recognized as important enough to be considered by the Royal Commission in some detail, and on June 27th, 1950, Dr. Glover and Mr. Grygier presented, in accordance with the wishes of the Royal Commission, the second memorandum on (a) 'short-term' methods of research on the effect (deterrent or otherwise) of Capital Punishment, and (b) on a method of preventing crimes of violence. This second memorandum has not been published. In a recent letter the Royal Commission agreed to the publication of the memorandum by the I.S.T.D. and it is reproduced in full below.

### *Section I. Scheme of Short-Term Research into the Deterrent or Other Psychological Effects of Capital Punishment*<sup>2</sup>

Prepared by Tadeusz Grygier, LL.M., B.Sc.,  
Research Fellow of the I.S.T.D.

PREAMBLE. One of the main differences between 'long-term' and 'short-term' methods of research is that whereas in the former instance it is possible to examine a problem without preconceptions, establishing and verifying each point discovered as the research proceeds, in 'short-term' researches it is necessary to proceed on the basis of existing knowledge and to confine the examinations to the most important factors.

The primary assumption on which these particular short-term researches are based is that the fundamental factor in deterrence through punishment is *fear* of one form or another, e.g. fear of pain, injury, loss or deprivation. In the

<sup>2</sup> During the discussion at the Royal Commission stress was laid by the Chairman on the desirability of short-term methods of research.

case of capital punishment, it would seem reasonable to suppose that its deterrent effect, if any, would operate through fear of loss of life (death) and all that this implies to the individual. It is therefore important to find out whether in fact the idea of Capital Punishment does operate in this way, or, if it does not, what factors prevent its so operating. It is known, for instance, that where punishment, or its threat, provokes reactions of hate, the response of the individual punished or threatened is likely to take the form of increased aggressiveness towards all authorities, thereby tending to cancel whatever fear effects may have been produced. In the case of Capital Punishment, it is therefore important to find whether *the idea* of Capital Punishment produces reactions of hate and aggression in persons of a criminally violent disposition.

Naturally these are not the only two factors involved, but in short-term work it is not possible to set the terms of reference too widely.

**PROBLEM.** To carry out a series of experiments in order to establish whether the threat of Capital Punishment invokes in the potential murderer the emotion of fear and induces him to control himself; to investigate this problem more deeply by examining the effect of the *idea* of Capital Punishment on the whole mental structure of violent criminals, in particular on their scheme of apperception (capacity and mode of comprehension of ideas), trend of associations (variety of mental responses to stimulating ideas), and the nature of their aggressiveness (variety of aggressive responses to actual situations and to stimulating ideas).

**TIME.** Minimum one year.

**STAFF.** In addition to the director of the research, at least one person trained in psychological testing, one person trained in interviews of the psychiatric type and one clerical assistant. It would be advisable to include a Rorschach investigator in order to collect additional information on the personality of the violent offender.

**POPULATION.** Fresh cases convicted for violent crime (murder, attempted murder, grievous bodily harm, armed robbery, etc.), who have spent not more than one year of their sentence in prison, are not insane according to M'Naghten Rules, and could be regarded as fairly representative of the 'potential murderer' personality.

*Experiment 1.* Population as above divided into matched groups, one experimental and one control, examined by means of:

(a) The Picture-Frustration Study (a new projective technique which has given some valid results in the examination of the delinquent's direction of aggression, ability to control his behaviour, and perception of everyday social situations at the level of action).

(b) A Thematic Apperception Test with some modification, including photographs of (a) gallows alone, (b) with attendant personnel; this should give a clue to the scheme of apperception in the violent offender and to the phantasies invoked by the idea of Capital Punishment.

(c) Psychiatric interviews with some discussion on various types of punishment and the offender's response to them.

The experimental group should be examined in the period of tension caused by an execution of a prisoner in the same prison. The control group should be examined in a period prior to this tension (if such planning is possible) or a few months after the execution in the prison.

*Experiment II. Population and method as in Experiment I.*

The experimental group should be examined immediately after having been shown a short realistic film involving death sentence and Capital Punishment.<sup>3</sup>

*Experiment III. Population as above examined in at least two of H.M. Prisons by means of:*

(a) A specially devised association test including various stimuli concerning Capital Punishment, imprisonment, detection, police, etc., in order to examine the trend of associations they invoke; in particular which of these ideas induce associations of fear, guilt and self-control, and which induce hostility and aggression.

(b) A Thematic Apperception Test as above.

(c) Psychiatric interviews as above.

The results of these experiments may yield conclusive results if they are: (1) psychologically meaningful, (2) statistically significant, (3) pointing in the same direction whichever it may be. It is assumed, however, that even inconclusive results would be valuable and throw some light on the personality of the actual and potential murderer, especially if all the subjects of the experiments could be additionally examined by the Rorschach Test and other projective techniques. These experiments would also be valuable for any future expanded programme of research which would involve not only violent but also non-violent criminals, the general public, juveniles, prison staff, etc.

*Experiment IV. Supplementary Investigation* involving more detailed examination of selected types.

During the preliminary survey of the population indicated for Experiments I, II and III, a small number of selected types, representative of the different forms of aggressiveness and violence, would be singled out for detailed personal psychiatric investigation. The duration of the investigation would vary in accordance with the responsiveness of the subject, i.e. from a few weeks to a few months. The number of investigators could be limited to four; these would deal with as many cases as time permitted, spending at least six months on the investigations and three months in a final study and presentation of their combined conclusions. The total time necessary would thus be nine months, although a provisional report might be presented earlier. The technique would be mainly of the free-association type, combined with detailed examination of response to ideas of Capital Punishment.

*Section II. A Method of Prevention of Pathological Crimes of Violence including Murder*

Prepared by Edward Glover, M.D., Chairman, Scientific Committee, I.S.T.D., Consulting Physician to the Portman Clinic, I.S.T.D. (formerly Senior Director, Psychopathic Clinic).

The suggestion made in Dr. Glover's memorandum was that since in the great majority of observed cases of pathological crimes of violence, some indication of the pathological tendency has been found to exist since childhood, it would be

<sup>3</sup> The possibility of producing a test-film of this sort has been investigated and found to be practicable and inexpensive.



possible to 'screen' the child population of Britain in order to detect such cases at an early stage and to keep under medico-psychological supervision and/or treatment all children or youths who show abnormal tendencies to violent conduct. On the question being raised whether this would not involve a costly and extensive investigation which might not be justified by results, Dr. Glover pointed out that a skeletal psychiatric organisation already existed and would in the ordinary course of events be expanded, which with a little adaptation and expansion would serve the purpose of a preventive screening system.

The main outline of the preventive scheme is as follows:

(1) Assuming that the Royal Commission thought fit to recommend to the appropriate authority, e.g. the Home Office, that the preventive scheme be initiated, it would be necessary for that authority to issue a joint directive to the Ministry of Health and the Ministry of Education.

(2) As far as the Ministry of Education is concerned, the aim would be to screen the existing school populations. There are two methods of approach to this problem. Each school child at present has a statutory examination three times during his school career. Attention is paid to physical difficulties but some School Medical Officers with psychiatric knowledge are able to detect early behaviour and emotional problems. Recent legislation also permits the Educational Authorities to give complete vocational guidance to children leaving school and several authorities already do so; the best example being that of Warrington, Lancs.<sup>4</sup> These vocational examinations involve the use of mental tests and provide an additional check on the mental stability of children already examined.

The second approach involves the co-operation of teaching staffs. Teachers of experience can readily recognize behaviour problems, and the potentially anti-social and violent child is one of the most easily detected educational problems. They should be instructed to report such cases to the headmaster, who in his turn would refer them to the School Medical Officer.

What is urgently necessary is an expansion of the psychiatric side of school examination, and this will certainly take place irrespective of any special aim such as is indicated here.

(3) In the absence of extended psychiatric facilities in the School Medical Service, both School Medical Officers and teachers can make use of the existing Child Guidance Centres where skilled psychiatric examination is available. All 'suspect' cases could be recommended for preliminary examination by projective tests (e.g. the Rorschach Test) or brief psychiatric examination, and such cases as appeared to require it could then be given detailed medico-psychological examination.

(4) The next step would involve organizing a form of 'notification' similar to that already existing in the case of certain infectious diseases. Potential violent offenders would be notified to the local Health Office, whose duty it would be to see that records were kept of various examinations, that treatment had been carried out and that proper after-histories were kept.

(5) Measures of observation, advice to parents, re-education and where possible individual psychological treatment would be the concern of the local

<sup>4</sup> Acknowledgement is made to Dr. Alfred Torrie of the National Association for Mental Health for information on existing facilities.

Child Guidance Centre or nearest Hospital Psychiatric Centre or, where existing, delinquency clinic. Observation would be continued until the end of the school period when a final review would be made and such cases as still required attention passed to the appropriate adolescent or adult psychiatric centre. Already some of these measures are in existence. The Bristol Child Guidance Clinic, for example, sees all young offenders, and other Child Guidance Clinics see from 3 to 5 per cent at least of such cases.

(6) In addition to these general measures, special attention would be paid to the screening of *remand home populations, approved schools and Borstal Institutions*.

Already twelve remand homes have a regular service of psychiatric consultation. About six to seven approved schools have regular psychiatric help, and one Borstal at least has a resident psychiatrist on the staff. All of these places could, with skilled help, detect a potentially violent psychopath. All that is necessary therefore is to increase the psychiatric facilities at such points or to make use of other local psychiatric facilities.

(7) A logical and essential extension of the screening system would be the examination of all *cases convicted of crimes of violence*, whatever the sentence or order of the Court. It is important to deal with this aspect of the problem because in the experience of the I.S.T.D. (Portman Clinic), cases of this sort are too rarely sent for examination, being dealt with summarily by sentences of fine or imprisonment. Because of this practice violent offenders escape examination and, from the preventive point of view, are lost sight of.

(8) By such means it would be possible in course of time to screen, isolate and treat a large proportion of potentially violent criminals, and a fair proportion of actually violent offenders. Even if no addition were made to existing psychiatric services, it would be possible to do extremely valuable work in this direction.

(9) The Clinical material so collected would be put at the disposal of research teams and thereby an invaluable *long-term research* into the problem of criminal violence set on foot.

EDWARD GLOVER.  
TADEUSZ GRYGIER.

#### PRELIMINARY NOTES ON THE APPLICATION OF INDIVIDUAL METHODS OF RESEARCH TO THE PROBLEM OF PSYCHOPATHY

Of the many methods of classifying research projects, the simplest is that which distinguishes between, on the one hand, the examination of case-groups sufficiently large to be subjected to statistical and other controls familiar to natural science and, on the other, detailed examination of individual cases without regard to statistical control. In both cases sub-division can be effected in accordance with whether the data is taken at its face value or whether it is subjected to interpretation in terms of its unconscious significance: and, still further, whether certain pathological aspects (e.g. symptoms) are singled out for investigation, or whether the total abnormal state is examined, or again whether the total mental function, both normal and abnormal, is investigated. Further information can be obtained by studying the constitutional, the predisposing and precipitating factors in symptom formation and the effect on symptom-formations of various

changes in the psychological environment, including that particular change which goes by the name of psychotherapy.

So far the majority of researches in delinquency have been of the case-group variety in which the data of observation are taken at their face value. Sociological investigations are almost exclusively of this type. The fractional or total investigation of individual cases without statistical control is still regarded with a suspicion which, in the case of psycho-analytical researches, is further darkened by the fact that the interpretation of data in terms of their unconscious significance is used as a *lever for further investigation of the same case*. This however is essential to the method. The interpretation of an unconscious resistance, for example, is essential to the discovery of what lies behind the resistance. Moreover, the psycho-analytical investigator claims that such apparently simple environmental conditions as the social and economic circumstances (past and present) of the family cannot be accurately estimated unless their unconscious significance for the individual case is taken into account. In fact the greater part of modern clinical psychology is based on discoveries made by Freud in the course of investigating the unconscious factors in mental disorder as observed in individual cases and without any but psycho-analytical varieties of control. In short, it can be and is maintained that the most scrupulous statistical investigation of psychopathic groups however large can be vitiated by the neglect of a single basic unconscious factor.

The examination of individual cases using either psycho-analytical methods of direct investigation or psycho-analytical valuations of descriptive data has the further advantage that it permits a balanced survey in each case of the different aspects of mental function either current or developmental. In other words, the examination is based on what Freud called metapsychological or three-dimensional criteria. Each case is investigated from dynamic (instinctual), topographic (structural) and economic (mechanistic) aspects. This enables researches to be directed not only with more precision but with greater regard to the total function of the mind.

Viewing research on psychopathy from this angle, a number of key problems emerge of which the following may be taken as samples.

(1) *Dynamic*. The clinical fact that psychopathic cases frequently manifest different forms of sexual perversion has so far been taken mostly at its face value. Even so the relation of this fact to the sexual inhibitions manifested by many psychopathic cases (e.g. their frequent impotence) has been comparatively neglected. This calls for further investigation from the dynamic point of view; for clearly any profound disturbance of the sexual instincts bears directly not only on the problem of frustration to which the psychopathic case is notoriously hypersensitive but on ego-disorder. An essential prerequisite of accurate valuation depends however on understanding by what unconscious means the psycho-neurotic avoids perversion formation. Hence comparative studies of individual cases of psycho-neurosis and psychopathy are called for; both of which should be controlled by the standard analytic findings in so-called 'normal' cases.

(2) *Structural*. In view of the disturbance or apparent absence of moral sense in the psychopath, it is clearly essential to have more detailed analytic investigation of that mental structure called the Super-ego or unconscious con-



science, in particular the phenomenon of 'regressive eversion' of the super-ego. Investigations along this line have hitherto neglected the fact that the psychopath under certain circumstances exhibits signs of super-ego activity that can scarcely be distinguished from those of the normal person. In other words the 'normality' of the psychopath deserves as much investigation as his more flagrant abnormalities. Comparative studies should be directed in the first instance to the nature of super-ego activity in the psychoses and in the psychopathies respectively, and, since the super-ego is not a simple structure, to the nuclear components specially involved in each case.

(3) *Economic.* Two special problems deserve prior consideration. The first pertains to the economic functions of the reality-ego, of which the exercise of reality-sense is the most significant. The psychopathic's disregard of consequences is more apparent than real. Although his appreciation of consequences is abnormally limited in its forward time-range (possibly a frustration-phenomenon) his unconscious exploitation of consequences during a crisis appears to be absolute and indicates the existence of accurate reality estimations. Comparative studies in this field include the full range of normal and abnormal states, but with a need for special correlation with the psychoses. Secondly, the influence of specific mental mechanisms of the projective type requires more detailed attention than it has hitherto received, particularly in cases manifesting sexual inversion. Here again correlation should be effected with both psychotic and normal types.

(4) *Symptom-formation.* As in other psychopathological states, the dynamic interaction of predisposing and precipitating factors holds the key to many problems including that of recidivism. It is important to establish the *serial* nature of instinctual and ego-fixations during the developmental period of childhood and to contrast this effectively with, on the one hand, the early multiple-fixations of the schizophrenic and, on the other, the later circumscribed fixations of the psychoneurotic. Moreover our concept of the nature of precipitating factors requires complete re-casting. There is already some evidence that the social determinants of psychopathic outbursts (frustration, stress, external hostility, temptation, etc.) are secondary to an *endopsychic* crisis often of a confusional or obsessional type, which shares the characteristics of the precipitating crisis in psychoneuroses and psychoses; that in fact the so-called social determinants of the crisis offer the psychopath an outlet for endopsychic stress (attempt at spontaneous cure).

(5) *Therapy.* The unconsciously effected change in balance of unconscious factors, dynamic, structural and economic, giving rise to the spontaneous cure of psychopathies in middle-age is a prerequisite of understanding the treatment of this condition. The factor of 'correction' of the serial fixations of the psychopath offers also a rational guide to psychotherapy. Owing to the defect in his reality-sense however, correction can only be achieved after a prolonged experience of a constantly helpful and non-punitive environment (or therapeutic group) which, however, must not be deceived by spurious 'conversions' on the psychopath's part and does not shrink where necessary, from applying generally assented measures of social security. Here the comparative study lies between the psychopath and the so-called normal person. The limitations of both ambulant and institutional psychotherapy must be clearly established and greater elasticity in their application achieved.

In case of misunderstanding it should be emphasized that whereas the direct application of these techniques requires competent psycho-analytical training, the successful application of psycho-analytical principles and valuations to individual data can be achieved given sufficient general orientation. In the case of anthropological researches into psychopathy, a much neglected branch of study, this is the method of election.

E. G.

## NOTES AND CRITICISMS

### PROBATION AND RELATED MEASURES, UNITED NATIONS, DEPARTMENT OF SOCIAL AFFAIRS <sup>1</sup>

This volume is a notable accomplishment as a comparative analysis of the history and present status of probation throughout the world. It is an invaluable synthesizing document in pointing up the varying usages and accomplishments in different countries, both because it provides fine perspective to the total probation movement and suggests implicitly certain lines of desirable development, particularly perhaps for those countries that have displayed smaller growth in this field. It is potentially of considerable value to the United States too, as will be noted in more detail below, in its exposition of experiences in other parts of the world that might be usefully adapted to practise in the States.

This study specifically excludes from specialized consideration the areas of juvenile probation, pre-sentence investigation and supporting clinical facilities, and detention, since these areas are to be the subjects of specialized monographs at some future date. Without them, however, the subject matter is extensive in scope. A brief introductory section is devoted to the essential features of probation. Part II, on origins and development of probation, provides an excellent analysis of the numerous legal and social sources out of which modern probation practice has grown. It effectively disposes of the notion that probation was spontaneously conceived by John Augustus a relatively few years ago. It reveals the gradual, largely unplanned, accretion and synthesizing of procedures by which suspension of prosecution, suspension of the imposition of sentence, and suspension of the execution of sentence have become associated with social investigation and case-work supervision. There is an excellent analytical summary of the spread of probation and related measures through the British Commonwealth; on the Continent of Europe (in Austria, Belgium, Czechoslovakia, Denmark, Finland, France, Poland and Switzerland); and in Asia, Latin America, and Africa. The contrast and similarities between the philosophy and practice of the United Kingdom and the United States and of the civil law countries which have followed largely the precedents established in the 'Franco-Belgian System' are well summarized.

Part III provides more detailed material on probation in the United Kingdom, New Zealand, Norway, Sweden, the Netherlands, and the United States, with particularly useful tables and summaries on the adoption and the extent of use of the conditional sentence, probation, and related measures. This section along with Part IV is of special value in its implications for the possible further diffusion of practices found useful in certain of these countries. Part IV focuses on the

<sup>1</sup> United Nations Publications, Sales No. 1951.IV.2, New York, 1951. On sale in Great Britain at H.M.S.O., price 22s. 6d.

various elements of the probation process and provides some critical evaluation of the differing practices in the field.

In addition to the text of the volume, there are some useful appendices, including extracts of historical statutes on probation in England, Sweden, and the United States; a thirty-page analysis of probation in the United States prepared by the Sub-Committee on Probation of the United States Working Group on Social Welfare Activities; and a memorandum by the Howard League for Penal Reform on minimum requirements for probation legislation and administration. There is also a useful bibliography and index.

There is a number of matters of some special interest to an American reviewer of probation developments in other countries, in terms of their possible adaptability to our own social and legal framework. One is impressed particularly by three phenomena in England: the successive efforts to consolidate their experience with probation measures, particularly as revealed by the Acts of 1907, 1925, and 1948. Here is represented the sort of systematic rethinking of objectives, methods, accomplishments, and revisions that is so desirable and yet so rare in the formulation and evolution of public policy. There is also the enviable development of residential arrangements in hostels, employed in conjunction with probation in the United Kingdom, whereby it is possible in many cases to utilize probation in spite of seriously faulty home situations and to avoid an institutional commitment. The lack of provision for non-institutional residence of delinquents who cannot be left in their own homes constitutes one of the serious weaknesses in most correctional systems. Third, the substantial development in recent years of planned and specialized training facilities for probation officers in England puts that country well ahead of others in the professionalization in this field. Authorities in the United States continue to struggle on the issues of whether correctional education should be provided in schools of social work, in graduate schools, or undergraduate colleges, with some preference among probation administrators for the schools of social work even though the latter have failed to provide any real specialized training for correction. The emphasis in England upon broad training in social science, including sociology, criminology, social case work, and the psychology of delinquency along with craft training in probation work, with a two years' university curriculum leading to a diploma in social science: all this represents a consolidation of experience and standards that has not yet occurred elsewhere.

It is interesting to note several other salient features of the probation movement that are very well brought out in this study: the development of systematized principles for employing different types of legal devices in connection with probation—the suspension of prosecution, the suspension of the imposition of sentence, and the suspension of the execution of sentence (see pp. 155–156). The present rule in England which avoids the technique of ordering probation without a finding of guilt appears to this reviewer much sounder both legally and socially than the practice in some jurisdictions in the United States and the recommendation from the American sub-committee (see p. 337). This is the more true in that there are various ways, including some employed in the States, for avoiding or eliminating a criminal record for individuals who successfully complete a term on probation. The critical view taken in the U.N. report concerning the idea of completely indeterminate periods of probation is also sounder than the position taken by numerous American criminologists (see pp. 213–216). There is an



interesting and indubitably valuable emphasis upon the consent of the defendant in the application of probation in England and elsewhere, a technique little employed in the United States. It would appear that this stress upon the somewhat voluntary character of the relationship should be useful in establishing a psychological receptivity in the probationer conducive to effective case-work. The considerably more extensive use of probation in some countries, e.g. Denmark and Sweden, with successful results suggests the possibility of its wider employment elsewhere to good effect.

It is unfortunate that in the report by authorities in the United States the quite dogmatic position is taken that, whereas probation rehabilitates offenders, institutional treatment ruins them (see pp. 311, 313). The non-punitive orientation of probation may be found in our correctional institutions as well: each is a vehicle for training through authoritarian control, and it is the more general view of American criminologists that both techniques are necessary for appropriate types of cases. The point illustrates some lack of realism in the probation field as to proper limitations on the area of its operation. In the opinion of this reviewer the effort to apply 'unofficial probation' to the treatment of pre-delinquents and other cases of unadjustment is peculiarly unfortunate, though it occupies a very large and increasing part of the limited probation resources in the United States. It might have been well to have brought out more specifically as to this country also the development of experiments in probation counselling in domestic relations courts and in civil cases, a movement that has recently become rather widespread.

There can be little question but that this volume is the most useful and objective study of probation that has thus far been published.

PAUL W. TAPPAN,  
*Professor of Sociology and Lecturer in Law,  
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#### WEEK-END CONFERENCE ON PSYCHOPATHIC PERSONALITY

A week-end course for psychiatrists was organized by the I.S.T.D. at Roffey Park Training Centre on May 18-20 on the subject of 'Psychopathic Personality'. The course was oversubscribed and will be repeated in October for those who could not be accommodated. The principal speakers were Dr. Mackwood, Dr. Denis Hill and Dr. Glover. Dr. Gibbens was host for the conference.

Dr. Mackwood dealt with the problems of selecting cases for treatment in prison. Among those who were clinically psychopaths there were many whose disorder was largely acquired. He discussed the value of various factors which gave a good indication that psychotherapy would be helpful; as well as his views of the basic pathology of psychopathy and the practical difficulties of treating cases in prison. He gave seven illustrative case histories.

Dr. Hill described the history of the concept of psychopathy and the information obtained from electrophysiological studies. The E.E.G. of behaviour problem children and adult psychopaths often showed abnormalities which in younger age groups would be normal, thereby supporting the theory of delayed maturation. More recently postero-temporal foci had been found which, when present, were always associated with gross psychopathy, though clinical diagnosis varied. Such brains were especially sensitive to chemical change due to starvation, hydration, etc., and he described instances of aggressive crimes associated with such abnormalities.

Dr. Glover gave a detailed description of the characteristics of adult psychopathy, and discussed the factors which seemed important in its development especially in relation to the early history of neurotics and psychotics. The adult psychopath was contrasted with the neurotic, psychotic, and normal man.

Dr. Gibbens listed the various estimates which had been made of the frequency of psychopathy in different populations and described the attempts made in foreign countries to deal with the psychopath by special legislation or institutions.

There was very vigorous discussion in the rather short time available, and interesting accounts given of the different practices under Section 4 of the Criminal Justice Act and in certification of psychopaths as defectives.

T. C. N. GIBBENS, M.D.

#### CO-OPERATION BETWEEN JUVENILE COURTS AND CHILD GUIDANCE CLINICS

The increasing use of Child Guidance Clinic facilities for diagnostic and treatment purposes by Juvenile Courts throughout the country leads to its own particular difficulties as well as to its own special values. Experience has clearly shown that where co-operation between Clinic and Juvenile Court is close and individual, most of the apparent difficulties are quickly straightened out. Nevertheless the necessarily different approach of these two organizations requires study if each is to gain the maximum possible value from the work of the other. It was for this reason that there was recently held, under the auspices of the I.S.T.D., a series of Discussion Groups between Probation Officers and Psychiatric Social Workers in the London area. The findings of these Discussion Groups have been co-ordinated and are given here, together with the experiences of the writer in a provincial County area. It is not intended that the views here given should be taken as final or complete: rather are they a basis for further discussion and investigation. It is to be hoped that interest in this matter will be stimulated in other parts of the country also.

There is undoubtedly a good deal of mutual suspicion between Clinics and Courts in various areas. The Clinic staff are apt to feel that the Courts have no real understanding of the purposes of treatment and that the Court is liable sometimes to interfere with the process of treatment by their administrative and legal decisions. On the other hand, some Magistrates and Probation Officers feel that the Clinic does not appreciate the social responsibilities laid upon the Court for the protection of the community and may regard the Clinic merely as the means whereby the delinquent evades the responsibilities of his actions. This mutual suspicion may often be high-lighted at an individual level between Psychiatric Social Worker and Probation Officer. The Probation Officer, in particular, may feel that his statutory responsibility for supervision of the delinquent is in conflict with the needs of the Clinic staff themselves to maintain close contact with both parents and child. It was the general opinion of the Probation Officers taking part in the Discussion Groups that this conflict need not necessarily arise. Where a Clinic was maintaining a close treatment relationship with the parents and child, then the Probation Officer, provided he was kept in close personal touch with what was going on in the Clinic, need not feel that he was neglecting his responsibilities even if he did not have regular interviews with the delinquent. On the other hand, where the Clinic had been mainly concerned with a diagnostic interview and recommendations as to disposal, or where they were intending to

maintain the child only on occasional survey, the Probation Officer was the person responsible for building up an adequate relationship with the delinquent and carrying out the necessary supervision which was, in this case, to be regarded definitely as a particular form of treatment. Here, too, the reverse process to that already described should operate: the Probation Officer should keep the Clinic staff in very close contact with the developing situation and he should be prepared to go to them for advice and discussion on any particular handling problems which arise during supervision. The decision as to where the responsibility lies for such relationship with the child can only be discussed at a Case Conference between the Probation Officer and the Clinic staff in the very earliest stages of the proceedings. Such a formal exchange of views should in no way prevent the informal contacts made by the Probation Officer and the Psychiatric Social Worker with each other during the course of the case. Indeed, the better the personal contacts between Psychiatric Social Worker and Probation Officer in the individual areas, the better the results are likely to be.

It was felt that if members of the Clinic staff, and in particular Psychiatric Social Workers, could occasionally attend at the Juvenile Court, and if Probation Officers could attend the Clinic Case Conferences, then a great deal of mutual understanding of each other's difficulties and responsibilities would result.

There was often room for much improvement in the types of report which were submitted to Courts by Clinics. That is not to say that these reports did not contain much valuable material, but the nature of its presentation and recommendations had to be adapted to the needs, statutory limitations and particular responsibilities of the Juvenile Court towards the delinquent. Here again mutual knowledge of the work of the other organization could be of inestimable value. It was appreciated that it was often unwise and unnecessary to put much clinical detail into a Court report, but that the Probation Officer might like to have much fuller information for his guidance during a subsequent probation contact. On the other side of the picture many Probation Officers were unwilling to put into a report which was to be read out in Court the necessary personal and environmental details which could be of such value to the Clinic. Here again personal interchange of additional information was shown to be both necessary and valuable.

It was realized that clashes must inevitably occur between what the Court felt bound to do—for example, where there were repeated offences during treatment—and the long, slow treatment which was so very often considered necessary by the Clinic. It was felt that here the Clinics had a real part to play in educating public opinion to the realization of the true social value of long-term treatment. This educative process was of particular importance in co-ordinating the attitudes and work between Magistrates, Probation Officers, Children's Departments and Child Guidance Clinics. Experience in one provincial area, where there have been for some time past monthly meetings to discuss points of common interest between the various bodies involved, has shown the great value of such intimate personal contact. Since most Clinics do serve much the same administrative areas as may one or two Juvenile Courts, it should be perfectly practicable to arrange such a degree of personal co-ordination. Very much will, of course, depend on the personalities of the Clinic staff, the Probation Officers, the Magistrates and, perhaps most important of all, the Clerk to the Justices.

T. A. RATCLIFFE, M.A., M.B., B.Chir., M.R.C.S.,  
L.R.C.P., D.P.M., D.C.H.



## RECENT CANADIAN LEGISLATION ON JUVENILE COURTS

In Canada, the Department of Social Welfare and Youth of the Province of Quebec has already drawn attention to its Youth Protection School Service by organizing a Conference on the subject at Montreal in November, 1949 (see *Journées d'Etude sur la Protection de la Jeunesse*). This was followed by the passing in 1950 of two important Statutes: the Act to establish the Social Welfare Court (14 George VI, Chapter 10) and the Act respecting Youth Protection Schools (14 George VI, Chapter 11). According to the former Act, every judge of the Social Welfare Court shall, in addition to the usual duties of a Juvenile Court judge,

'... strive for the protection of children and for good relations between consorts.

For such purposes,

- (a) he shall advise all persons who seek his good offices for the rehabilitation of juvenile delinquents, the protection of children who are particularly exposed to moral and physical dangers on account of their surroundings or other special circumstances, and in general he shall collaborate in the improvement of the lot of unhappy and neglected children;
- (b) he shall act as moderator, when so requested, in any dispute between consorts or between parents and children.'

The second Act provides, *inter alia*, that

'when a child, apparently or actually more than six and less than eighteen years old, is particularly exposed to moral or physical dangers by reason of his environment or other special circumstances, and therefore requires to be protected, any person in authority may bring him before a magistrate'.

The latter shall then investigate the case and if he is convinced that the best interest of the child requires his admission to a Youth Protection School he has to report to the Minister of Social Welfare and Youth who has power to commit the child to the appropriate school. In cases where no person in authority takes the initiative in bringing the child before a magistrate, the Minister may himself take the necessary steps. There is, however, an appeal to the magistrate against such decisions of the Minister.

H. M.

THE SIXTH REPORT ON THE WORK OF THE CHILDREN'S DEPARTMENT <sup>2</sup>

The long-awaited Report of the Children's Department, the first since 1938, was finally published in May of this year. In the intervening years the Home Office has become the central department responsible for nearly all children deprived of a normal home life and has assumed other enlarged responsibilities traceable to the increase in juvenile delinquency in the years since 1938.

In the happenings of those twelve years there lies embedded all that evacuation taught us: of the change from unemployment to full employment; of shifts of population and housing problems; of family uprootings and strains; of attempts to make good the negligences and ignorances of earlier years; and against tremendous odds to meet the demands of new situations. In those years and against that background the enlarged Children's Department has had to guide the setting up of the whole modern child care service as well as endeavouring to combat by such means as lay within its power the alarming rise in juvenile delinquency.

<sup>2</sup> H.M.S.O., May, 1951, 152 pp., price 4s.

Some hints of the magnitude of this task, what it has involved, what has been achieved, what learned, what is still to do can be gathered from the calm official language of this Report. But those who know how a universal child care service has been evolved from a thing of shreds and patches, how much has been won, how much remains to win, will hope that some day someone with a freer and more vivid pen will tell this story—in its way an outstanding one in our social history. Civil service English, even at its best, invests any subject it touches with a dim radiance of complacency in which all lights and shades are blurred, making it strangely hard to distinguish real achievement or real difficulties from a delicate regard for corns.

There is in this Report an enlightened attitude towards the need for fundamental research into nearly every aspect of juvenile delinquency and we are given in some detail the over-all conclusions about 'possibilities and methods' of enquiry reached by the group of university sociologists and psychologists who met at Nottingham University early in 1950 on the initiative of the Home Office. Yet although, as the Report says, 'the field of enquiry is of dismaying size' little sense of moving about in worlds not realized seems to infuse the succeeding pages. Fortunately such a criticism would be grossly unfair if it were levelled at the Department itself rather than at the sometimes unduly pedestrian descriptions and pronouncements of the Report.

The chapter on 'Juvenile Delinquency and the Juvenile Courts' opens with an account of the nature of juvenile delinquency. It includes a salutary reminder of the limited function of the juvenile courts which 'can usually do no more than decide upon the treatment that is necessary'. Later on there is a description of the better facilities for observation now available at some remand homes to help magistrates in the difficult task of diagnosis and the sometimes momentous decision as to treatment. It describes with the aid of some useful statistical tables that unsolved mystery the wavering rise in juvenile delinquency since 1948 and classifies the views on causes put forward by a variety of eminent officials, but very wisely refrains from entering the lists as the champion of any of them.

The section of 'New Methods of Treatment' is confined to two new institutions: Attendance Centres under the Criminal Justice Act, 1948—an experiment which perhaps suffers from an inherent conflict of differing philosophies<sup>3</sup>—and the Henderson Fund Home started by voluntary funds for the reception of 'pre-maladjusted' boys and girls from the London juvenile courts. The Home is intended for those whose problems may be substantially alleviated by a stay of about a year and whose absence will, it is hoped, make their parents' hearts grow fonder. It is to be regretted that this section does not include any information about new and successful methods being tried in existing institutions. Although the whole chapter is about the juvenile courts the reader will in fact gain no picture of the work of the courts from it, of differences of practice in different parts of the country, of significant experiments, or examples of imaginative co-operation between different statutory and voluntary services. Interesting statistics are given of the ages of juvenile offenders and juvenile court magistrates: the peak age for the former has remained constant but for the latter has happily fallen from 60–69 in 1938 to 50–59 in 1949.

The chapter on Approved Schools is one of the most valuable in the Report. It gives a good idea of the expansion of the approved school system since 1939, not only in numbers but also in better organization and increasing clarity of

<sup>3</sup> See the Note, Vol. I, p. 230 of this *Journal* (Ed.).

purpose. It includes some particularly interesting material on special developments, classification and after care. It is surprising on the face of it to discover that the schools are successful (years not given) with about 80 per cent. of girls as compared with 66 per cent. of boys, but the criterion of failure is, of course, re-conviction within three years, and as a higher proportion of girls than boys committed to approved schools are beyond control or in need of care or protection, i.e. do not show their social maladaptation in the form of delinquency, this may illustrate the inappropriateness of the criterion rather than the greater success of the system with this most difficult group. Some brief indication is given of some of the material already accumulated at Aycliffe Classifying School, including the respective behaviour of care or protection and delinquent boys. 'The results show that there is no significant difference between the two groups and that a boy committed for an offence is just as likely to be a good or bad influence as a boy committed for other reasons.' If there is little difference between these two groups; if it is often almost a matter of chance whether a boy is committed by the courts to an approved school or to the local authority as a fit person and thus finds his way to a children's Home or a foster home; if some boys go via the courts and the local education authority to boarding schools . . . but these are dangerous thoughts.

There are many people with a knowledge of the children who come before the courts who will not share the apparent satisfaction of the Children's Department with the psychiatric services available for them. The statement that 'psychiatric treatment can usually be obtained according to need', i.e. through child guidance clinics or centres, provision for maladjusted children under the Education Act or in mental hospitals and mental deficiency institutions, is to confuse paper provision with reality and to ignore the well-known fact that courts have to commit many maladjusted children to approved schools because no other facilities are available for them. This in spite of the fact that 'approved schools are not . . . organized and equipped to deal with the seriously handicapped child and it is seldom possible to provide psychiatric treatment within the school though endeavour is made to use such local facilities as are available' although 'psychotherapeutic treatment undertaken in an ordinary approved school or by attendance at a clinic has been tried, but has not been altogether successful: visits to a school by an experienced psychiatrist to advise on particular problems have proved more efficacious'. The alarming though perhaps unintended impression is conveyed to the reader that 'psychiatric work' in approved schools should be confined to children who are so mentally ill as to demand individual treatment. There is no overt recognition that most children in approved schools come from homes where there are defective family relationships, that a series of emotional upheavals with accompanying rejection and resentment will often have preceded their committal, and that whether or not they require formal individual treatment, they at least need the same kind of preventive service which is provided as a matter of course for their physical health. This may well be better given by associating a psychiatrist with the general regime of the school than by actual individual treatment. Indeed, as Dr. Bovet suggests in his recent World Health Organization monograph, actual psychotherapy presents great practical difficulties and has many drawbacks, although 'no up to date reform institution can be organized without regular psychological and psychiatric collaboration'.<sup>4</sup>

<sup>4</sup> L. Bovet, 'Psychiatric Aspects of Juvenile Delinquency'. World Health Organization, 1951. See also *Brit. J. Delinq.*, 1951, 2, 49-50.



Space forbids the consideration of other sections of the Report which contain useful information about the early days of the new child care service. It is to be hoped that from henceforth this Report will be issued annually and will be each year of the same length as the present one into which has had to be compressed with undue brevity the happenings of twelve momentous years.

EILEEN YOUNGHUSBAND, J.P.

*Chairman, Stamford House Juvenile Court, London.*

#### ASSOCIATION OF WORKERS FOR MALADJUSTED CHILDREN

An 'Association of Workers for Maladjusted Children' has recently been formed in London, with Dr. Portia Holman as Chairman, Mr. W. David Wills as Hon. Treasurer, and Mr. Otto L. Shaw, Red Hill School, East Sutton, nr. Maidstone, Kent, as Hon. Secretary.

Among the objects of the Association are the following:

- (1) To seek means by which all maladjusted children and young persons may be treated, educated and rehabilitated as useful members of society.
- (2) To provide a professional body whose actions and recommendations would have weight with other bodies with whom the constituent members or schools have relations.
- (3) To examine the methods employed in schools and other institutions for maladjusted children.
- (4) To encourage experiment in methods of education and treatment.

#### THE POLICE JUVENILE LIAISON OFFICER SCHEME IN LIVERPOOL

The Chief Constable of Liverpool has, at our request, sent us the following Note:

In July, 1949, a scheme was introduced in the City of Liverpool by the Chief Constable which, it is hoped, will eventually prove very beneficial in the prevention of juvenile crime.

In each of the seven divisions of the Liverpool Police Force, a specially selected police officer has been appointed to act as juvenile liaison officer for the division. These officers have, as their full-time duties, the adoption of all the possible measures they can undertake which will help in the prevention of juvenile crime.

As their name implies, much of this work is done in liaison with the many other people in the City who are concerned with the welfare of children. The juvenile liaison officers maintain regular contacts, for example, with such persons as head teachers, school attendance officers, probation officers and youth club leaders. They give talks on the subject of juvenile crime to parents' associations and church meetings, and they keep in close touch with ministers of religion.

The real emphasis of their work is on prevention and in this connection their local knowledge and their contacts enable them to do a great deal for children who appear to be forming bad associations or who appear, by their general conduct, to be drifting towards more irresponsible behaviour. In these cases they visit parents and teachers and endeavour to introduce the children concerned into youth clubs and other similar organizations. As an indication of the value of the scheme it is of interest to note that something like 256 boys were introduced to Boys' Clubs of one sort or another and over 751 homes were visited during 1950.

Another important feature of the scheme is that the juvenile liaison officer is a police officer to whom those people who are concerned with the welfare of youth such as ministers of religion, head teachers, youth club leaders, etc., may go when they require help or advice regarding any of those youngsters for whom they are responsible.

Where children have already been guilty of committing crime the task of the juvenile liaison officers is to try and prevent recidivism and it is here that their efforts are most valuable and most successful. By close contact with such children and their parents they have already been able to do a great deal of good.

The success of such a scheme as this cannot easily be measured, and, in any case, it is essentially a scheme which, as far as the figures for juvenile crime go, will produce noticeable results only gradually. Nevertheless, the knowledge of the child population of the city, which the officers are steadily building up and the close links they are forming between the police and all those interested in child welfare, are already proving invaluable.

It has been held since police forces were first formed, that their primary duties must be the protection of life and property and the *prevention* and detection of crime. Nothing can be more important than the physical and moral welfare of children, and the scheme adopted in Liverpool represents an attempt to do something positive and direct for children in a rather special way. It is too early yet to form definite conclusions as to the success of the scheme but the indications up to now are that the police juvenile liaison officers in Liverpool are rapidly becoming almost indispensable units in the city's organization for dealing with one of its most important problems.

#### THE REPORT OF THE ROYAL COMMISSION ON BETTING, LOTTERIES AND GAMING, 1949-51 <sup>5</sup>

It was easier to denounce the receipt of rewards without effort in the nineteenth century than it is now. Then the receipt of something for nothing, except through inheritance, was considered immoral, and if the something received came from the State, the recipient lost his vote. But in these days of the Welfare State the receipt of something for nothing is national policy and involves no penalty.

So it is not surprising that in their report the Royal Commission failed to be convinced by those who denounced all gambling as inherently immoral. The report goes further. 'We have been unable to find any conclusive evidence to support the view that gambling interferes with production.' Little evidence was also found to support the view that gambling is 'an important cause of juvenile delinquency', or of crime generally. Further, 'we do not think that the evidence supports the view that the effects of gambling on character are necessarily harmful'.

The essence of this report lies in this sentence: 'It is the concern of the State that gambling, like other indulgences such as the drinking of alcoholic liquor, should be kept within reasonable bounds, but this does not imply that there is anything inherently wrong with it.'

The recommendations give expression to this policy. There should be licensed betting offices to take the place of illegal street betting. Bookmakers and their main staff should be registered and such registration should be cancelled for proved breaches of the law. Various detailed suggestions are made to control

<sup>5</sup> London, March, 1951, Cmd. 8190, H.M.S.O. Price 4s. 6d.

Pool betting; also Dog Racing tracks. Amusement arcades and fun-fairs should be licensed and the admission of those under eighteen years may be prohibited.

The Commission found that expenditure on gambling 'represents not more than 1/10th of total personal expenditure'. The estimate of £44.2 million was made for all forms of gambling in 1949 and this compares with £326 million for alcoholic beverages and £151 million for tobacco. Little wonder that a Probation Officer told the Commission: 'I think its (gambling's) share of the family income amounts to very little in itself, but when it is taken together with smoking and perhaps drinking, expenditure of money on these objects is the reason for a good deal of secondary poverty in the working class home.' The Commission described this statement as 'well put'.

One of the drawbacks of gambling is the effect of success. 'The evil lies', says the report, 'not in the fact that they have won money, but in the fact that they have won more money than they know how to handle properly.' This is a special drawback of Football Pools.

A sound comment is made in the statement that 'the spread of gambling is one of the symptoms of an age in which people have more leisure and cannot, or do not know how to, make good use of it'.

One may well question the statement in the report that the 'average gambler' does not 'fail to see that those who provide the facilities for betting are prosperous'. Do those who provide the weekly income of those who organize Football Pools ever pause to reflect upon the immense profits to be derived? Do visitors to Dog Races reflect upon the vast profits that have accrued to the organizers?

On the whole this is a sensible and practical report, and it is to be hoped that it will not be allowed to suffer the oblivion that has fallen on so many reports of Royal Commissions.

CLAUD MULLINS.

#### INTERNATIONAL SOCIETY OF CRIMINOLOGY

This Society has been developing slowly for some years and has now reached a stage where it may reasonably claim support from scientific workers in this field throughout the world. There can be no doubt that there is a real need for a learned society whose aim is to promote scientific research and intercommunication in Criminology and which can provide a stimulus to, and a medium for, greater contact between criminologists in the various sciences concerned with this subject in all countries. This Society also has among its aims the convening of periodic Congresses of Criminology and the formation of an International Institute of Criminology, the functions of which would include research, teaching, exchange of information, bibliographical study, and publication of original work and commentaries.

If these aims are to be achieved it is essential that the Society should receive support from an adequate number of members. I believe that many of your readers would wish to further the work of the Society and would be interested in a brief note of its history and present management.

This Society had its beginnings in 1934 when delegates of scientific societies and specialized institutes from Argentina, Belgium, France, Germany, Great Britain, Italy and Spain decided to create an international organization of criminologists and criminological societies, and periodically to convene international conferences.



The first International Congress was held in Rome in 1938 and its highly successful proceedings were published in five volumes in 1939. At this Congress the International Society of Criminology was formally instituted and twenty-nine institutes and scientific societies in various countries supported it. The activities of the Society were suspended during the War so that the Society was almost stillborn, but in recent years the Society has developed rapidly. The Second International Congress was held in Paris in September, 1950, and was attended by 760 persons from sixty countries.<sup>1</sup> The Society was then reconstituted. The new Council there elected was given a directive on the future activities of the Society and has since elected a highly competent and representative Scientific Committee which will plan and direct the purely scientific activities of the Society. The Board of Directors, of which one-third retire in rotation each two years is constituted as follows:

*President:* Denis Carroll, Consultant Psychiatrist, Portman Clinic (I.S.T.D.), London.

*Vice-Presidents:* Sheldon Glueck, Professor, Harvard Law School, Cambridge, Mass.; Roland Grassberger, Professor, University of Vienna; Jean Graven, Professor, University of Geneva; Alfredo Molinario, Professor, University of Buenos Aires.

*Secretary-General:* Jean Pinatel, Government Inspector-General, Paris.

*Assistant Secretaries-General:* Carlo Erra, Judge, Court of Appeals, Rome; J. M. Van Bemmelen, Professor, University of Leyden.

*Treasurer:* V. V. Stanciu, Attorney, Paris.

*Members:* Isidoro de Benedetti, Professor and Director, Institute of Penal Law, Ministry of Justice, Buenos Aires; H. Donnedieu de Vabres, Professor, University of Paris; Israel P. Drapkin, Director, Institute of Criminology, Santiago de Chile; Erwin Frey, Children's Magistrate, Basle; Etienne de Greeff, Professor and Director, School of Criminology, University of Louvain; Filippo Grisogni, Professor, University of Rome (Hon. Member of Society); Georges Heuyer, Professor, University of Paris; Olof Kinberg, Emeritus Professor, University of Stockholm; Daniel Lagache, Professor, University of Paris; Osvaldo Loudet, Professor, University of La Plata; Hermann Mannheim, Reader in Criminology, University of London; P. Piprot d'Alleaume, Paris (Secretary General d'Honneur); Leonidio Ribeiro, Professor, University of Rio de Janeiro; Thorsten Sellin, Professor, University of Pennsylvania, Philadelphia, Pa.; Benigno di Tullio, Professor, University of Rome (President d'Honneur).

*Executive Committee:* This consists of the President, the four Vice-Presidents, the Secretary-General, the two Assistant Secretaries-General and the Treasurer.

The scientific fields of work of the members of the Board include Criminology, Sociology, Psychiatry, Psychology, Psycho-analysis, Biology, Anthropology, Law, Police Science, Forensic Medicine, Penology, Penal Administration, etc.

Professor Thorsten Sellin, Professor Paul W. Tappan and Dr. Gregory Zilboorg are the Society's permanent delegates to the United Nations Organization. The Society has been granted consultative status by U.N.E.S.C.O. and by U.N.O.

The Society has two types of membership: individual and corporate. Organizations interested in the scientific study or treatment of delinquency can apply for corporate membership. Students and students' associations can apply for membership at a reduced fee.

<sup>1</sup> See *Brit. J. Delinq.*, 1951, 1, 220-25.

All types of membership are by election.

The present subscription rates are 1,520 fr. (French) for individual persons and 5,080 fr. (French) for societies.

All the communications should be addressed to the Society's offices to:

The Secretary-General, Avenue de Friedland 28, Paris, 8-e.

DENIS CARROLL.

*President, International Society of Criminology.*

#### A NOTE ON RECENT PUBLICATIONS

The reappearance in 1950, after an interval of several years, of one of the oldest and best-known periodicals in the field of criminal law and criminology, the German *Zeitschrift für die gesamte Strafrechtswissenschaft*, is a remarkable event. The hope may be expressed that the great tradition established by Franz von Liszt and upheld by his successor Eduard Kohlrausch will be carried on by the present editors and that especially the criminological side will be further developed. The four issues of Vol. 63 which have so far reached us contain, in addition to obituaries for Eduard Kohlrausch and Gustav Radbruch, articles devoted mainly to problems of criminal law. There are interesting contributions by Jimenez de Asúa on '*nullum crimen, nulla poena sine lege*', by Ernst Heinitz on judicial sentencing policy, by Werner Niese on narco-analysis. The '*Auslands-Rundschau*' (review of developments abroad), under the direction of Adolf Schönke, and the review section are again two of the most valuable features of the Journal. In No. 3 the recent criminological literature is reviewed by Ernst Seelig.

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In Italy, in addition to *La Scuola Positiva*, the old-established journal founded by Enrico Ferri and now in its fifty-eighth year (present editor-in-chief Professor Filippo Grisogni), and the post-war *Rivista de Difesa Sociale* of the *Istituto internazionale per gli studi di difesa sociale*, now in its fifth year, a new bi-monthly criminological periodical, the *Rassegna di Studi Penitenziari*, has recently been founded under the auspices of the Italian Ministero di Grazia e Giustizia and with Signor Carlo Erra, Judge of the Court of Appeal, Rome, as editor-in-chief.

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In the twelve months which have elapsed since the Second International Congress of Criminology was held in Paris its work has been widely discussed in criminological and other scientific periodicals. After Professor Jean Graven's well-balanced general survey in his *Revue de Criminologie et de Police Technique*, Vol. IV, No. 4, there have been several more specialized contributions to the debate, of which only a few can here be mentioned.

Dr. Erwin Frey, the juvenile court magistrate of Basle, who was the general *rapporteur* of the Congress on juvenile delinquency, writing in the *Schweizerische Zeitschrift für Strafrecht*, Vol. 65, No. 1, stresses the changes in general outlook which, he believes, have occurred within the twelve years' period between the Rome Congress of 1938 and Paris, in particular the universal recognition now achieved for the multilateral approach in criminological research which has made the old controversy between constitutional and environmental theories entirely obsolete.

He has some pertinent remarks on the tendency of most of the discussions at the Congress to stray from its main topic, which was the analysis of criminological method—a tendency which he regards as inevitable in view of the fact that criminology is no 'autonomous' science and therefore incapable of developing its own scientific method. The principal function of criminology, as Dr. Frey points out, is to check and co-ordinate the findings of its auxiliary disciplines. To fulfil this task, Institutes of Criminology, culminating in an International Institute, are required which would also fill the many gaps left by the unco-ordinated and haphazard systems of teaching at present provided by those universities where the subject is taught at all. In accordance with the continental tradition, Dr. Frey is in favour of linking these institutes to the Faculties of Law.

In his Inaugural Lecture as a guest professor at the University of Aberdeen, published in *The Juridical Review*, April, 1951, Professor J. M. van Bemmelen, Leiden, taking up Professor Thorsten Sellin's challenge (see *Brit. J. Delinq.*, Vol. 1, p. 222), disputes Sellin's view of the criminologist as 'a king without country' mainly for two reasons: firstly, criminology has, to some modest extent, already succeeded in establishing certain generally applicable laws; secondly, as the judge whom van Bemmelen regards as the criminologist *par excellence* has the power of finally deciding the case, the criminologist is even more 'king in his country' than other scientists are in theirs. While fully agreeing with the author's first argument, we cannot follow him with regard to the second. The judge as such, i.e. in his judicial capacity, is not a criminologist; he can merely make use of the work of criminologists of whom, as a private individual, he may be one.

The definition, diagnosis and treatment of the *état dangereux*, the problem of the potentially dangerous criminal, was one of the topics of the Paris Congress. Professor Olof Kinberg, Stockholm, in his paper 'Les situations psychologiques précriminelles révélatrices des caractères de l'état dangereux', in the Swedish Journal *Theoria*, Vol. XVI, No. 3, makes an important contribution to the problem by developing a system of situations either specifically dangerous or dangerous in an unspecified way, which latter he calls *amorphes*. Among the former he mentions such typical constellations as the pre-incestuous situation, and the situation potentially leading to homicide within the family or of the sweetheart or to homicide committed by chronic alcoholics. In the second group, where situations are less clearly definable, imprisonment may play an important part (prison as a criminogenic factor was one of the items of the Section Penology of the Congress). The author's conclusion, which forms of course the basis of all recent prediction studies, is that from a close observation of the individual and of his behaviour in specific situations a prognosis can be made of his dangerousness. He utters a warning against the frequent mistake of regarding the gravity or pettiness of past offences as the most important yardstick of his future dangerousness and stresses the need for further systematic research. It is gratifying to find here a close affinity between Professor Kinberg's views and the proposals submitted by the I.S.T.D. to the Royal Commission on Capital Punishment (above, p. 144).

In 'Un gangster. Commentaire psychanalytique d'une observation médico-légale', *Revue Française de Psychanalyse*, 1950, No. 4, Professor Daniel Lagache of the Sorbonne presents a penetrating study of a young professional criminal who, beginning as a thief, ends as a murderer. In his psychological analysis, intended as a clinical illustration of the theory of *psycho-criminogénèse* which he



formulated in his General Report at the Paris Congress, Lagache stresses the close affinity of stealing and play, both aiming at immediate satisfaction and being, in effect, the reaction of a young and immature personality against the discipline of work; the tendency of the criminal to assume a 'rôle,' to adhere to a stereotyped cliché (*l'identification héroïque*); and the psychological significance of the *argot* for such criminal types. In his psychiatric diagnosis, he refers to the possibility that, in this case, criminal behaviour may have to be regarded as a struggle against a manic-depressive condition, and in his assessment of the respective forces of constitutional and environmental factors he draws attention to the importance of quantitative aspects in the interplay between these two opposites. For the final evaluation of this case Lagache adopts Eissler's distinction, in 'Searchlights on Delinquency', between two stages in the development of delinquency, corresponding to that in the neuroses and psychoses, i.e. the stage of withdrawal from certain sectors of reality and the stage when the ego attempts to change reality in accordance with its own requirements.

\* \* \*

Professor Jean Graven's report to the Royal Commission on Capital Punishment on 'Le système de la répression de l'homicide en droit suisse', published in the *Revue de droit pénal et de criminologie*, January, 1951, supplements with very interesting detail the short note on the subject in the Home Office White Paper of 1948 (Cmd. 7419). Professor Graven makes it clear that in Switzerland the murderer is kept in the same prisons and treated in exactly the same way as other long-term prisoners, for example, with regard to cellular confinement for a brief initial period. He also shows that the increase in serious crimes of violence which followed the first abolition of capital punishment in 1874, and led to its reintroduction in a number of cantons in 1879, was only of short duration. Later experiences, he points out, confirmed the truth of Montesquieu's observation that '*dans les pays où les peines sont douces, l'esprit du citoyen en est frappé, comme il l'est ailleurs par les grandes*'. The cantons which did not reintroduce the death penalty had no higher crime rates than the others; '*la peine de mort ne s'est pas révélée nécessaire*', and its complete abolition (with certain reservations for military crimes in war-time) by the Federal Penal Code of 1937 was the inevitable consequence.

\* \* \*

The work of the California Youth Authority, which will soon complete its first decade, is being closely watched in this country. Its progress has, from time to time, been described by its Director, Mr. Karl Holton (see his article in the *Journal of Criminal Law and Criminology*, May-June, 1950). In addition, more detailed information is regularly provided in the lively *California Youth Authority Quarterly*, which is now in its fourth year. Its contents should be of particular interest to staffs of institutions for juvenile delinquents in this country who have to deal essentially with the same problems as the staffs of the six correctional schools and four forestry camps now administered by the Authority. In the Spring number, 1951, however, there is also a useful article by Mr. E. M. Bower, Consultant in Mental Hygiene and Education, on the question of how to train teachers to recognize at an early stage serious maladjustment in school children.

H. M.

Notes on the following Reports will be published in our January, 1952, issue:

(1) Report of a Committee to review Punishments in Prisons, Borstal Institutions, Approved Schools and Remand Homes. Parts I and II: Prisons and Borstal Institutions. (H.M.S.O., June, 1951. Cmd. 8256. Price 3s. 6d.)

(2) London County Council Report of the Committee on Juvenile Delinquency, September, 1950, submitted to the L.C.C. in June, 1951.

(3) Criminal Statistics, England and Wales, 1950. (H.M.S.O., 1951. Cmd. 8301.)

(4) Crime. Papers relating to the large number of crimes accompanied by violence occurring in large cities. (Home Office, July, 1951.)

(5) *Ministère de l'Intérieur: Extrait du Rapport d'Ensemble présenté par l'Inspection générale de l'Administration: Administration pénitentiaire, 1949-50, Paris.*

## CRITICAL NOTICE

WAYWARD YOUTH. By August Aichhorn. Second Revised Edition. (London: Imago Publishing Co. 1951. Pp. xix + 236. Price 9s.)

To describe a book as a 'classic' is often tantamount to passing a death-sentence on it. This is even more true of a scientific text-book than of a literary work. For whereas the latter may, despite the intimidating label, continue to be read by generations of reluctant students and teachers, the scientific classic commonly ends by being decently interred in footnotes and lists of references, only the title and one or two hackneyed quotations being handed on from article to article or from text-book to text-book by writers who have never even seen the original, much less read it. For this among other reasons the second English edition of Aichhorn's classic calls for re-assessment in the light of modern researches on delinquency.

Actually the quality of the book and the qualities of its author can be inferred from the title originally chosen for it, 'Verwahrloste Jugend', which curiously enough emerges in translation as 'Wayward Youth'. It would be interesting to know what exactly the author meant by *verwahrlost*: for although, when Aichhorn first wrote, the word was already in current use in the literature of delinquency<sup>1</sup> its meaning was somewhat ambiguous. It could indicate either an environmental or an endopsychic factor in anti-social conduct. Actually the term connotes specifically 'uncared for', 'abandoned' or 'neglected', as in the case of 'waifs and strays' spoiled by a state of neglect or squalor, whereas 'wayward' can be read as 'childishly self-willed' as well as 'capricious', 'froward' or 'unruly', incidentally a by no means inappropriate part-description of the psychopathic type, which could be better rendered in German by *wider-spenstig*. However ambiguous its scientific connotation, the expression serves to indicate the characteristic approach of its author who broke through the conventional implications of the words 'criminal' and 'delinquent' to discover the psychological characteristics of the individual offender and who maintained that

<sup>1</sup> See, for example, Hans Gruhle, 'Die Ursachen der Jugend-Verwahrlosung und Kriminalität' (1912), and Gregor and Voigtländer, 'Die Verwahrlosung . . .' (1918). Already in 1901 Krohne had written on institutions for 'verwahrloste' Jugendliche.

anti-social conduct represents the coefficient of friction between parental influences and the instincts of the child.

Add to this the fact that Aichhorn, after exploring the resources of academic psychology, found in Freud's theory of unconscious conflict the solution to many of his problems, and it might appear, as indeed the publishers suggest, that Aichhorn was simply the first to apply psycho-analysis extensively to the study and treatment of delinquency. This however would do less than justice to the individuality of Aichhorn. It is of course true that in the earlier days of psycho-analysis a number of pioneers sought to exploit the new theory in investigations of the social and cultural activities of man. It became the fashion indeed for newcomers to win their spurs in the field of applied psycho-analysis. Aichhorn did not belong to this band of knights-errant. He was not an analyst exploring the field of delinquency, but a student of human nature who turned to psycho-analysis for help in the understanding of delinquent youth. He was first and last a pedagogue, a teacher moulding his charges by precept and example.

That he was an educationalist rather than a clinical research scholar is evident on the very first page where he defies all standards of classification by including under the term 'wayward' not merely delinquent and dis-social children but also so-called problem children and others suffering from neurotic symptoms. This is essentially the view of the enlightened pedagogue whose professional interest is first aroused by the discovery of 'problem children' who prove refractory to the routines of school life. In one sense it is a pre-requisite of understanding delinquency, since to isolate delinquency from the behaviour problems and neuroses of the non-delinquent is to strangle research at birth. Nevertheless we are now at the stage when, having discovered the common sources of behaviour problems, we must establish a specific etiology for each distinct variety. Aichhorn had certainly not reached this point when he first wrote this book; and it would have been more appropriate had he contented himself with the title 'Delinquent Youth'.

This pedagogic angle of approach becomes more manifest throughout the book. Following the lines laid down in the psycho-analytic theory of the neuroses, Aichhorn drew a distinction between 'manifest delinquency' and 'latent delinquency'. Delinquency is manifest when it develops into dis-social behaviour: it is latent when the same state of mind exists but has not yet expressed itself. From this generalization Aichhorn drew a number of practical conclusions; for example, that the task of re-education is to weaken the latent tendency and that the removal of dis-social symptoms is not necessarily a sign that the latent conditions have been liquidated. But putting these considerations aside for the moment, we may note that his first attempt at classification was a very modest one, namely, into borderline neurotic cases with dis-social symptoms and dis-social cases in which that part of the ego giving rise to the dis-social behaviour shows no trace of neurosis. This, however, does not reflect Aichhorn's flair for differentiation; the different causal factors he enumerates and illustrates by simple yet convincing case-histories could well form the basis of an etiological classification; *e.g.*, traumatic types, faulty identifications with one or other parent, too strong love relations with parents or siblings, pathological regression of libido, jealousy of siblings, pubertal stress, sensitiveness to frustration with consequent weakness of reality sense, various types of unconscious guilt, and faulty super-ego formation. In short, as far as etiology is concerned, Aichhorn followed the broad lines of a developmental approach, with the consequence that his therapeutic endeavours



were concerned with the correction, mostly through environmental influence, of the faulty stage of development responsible for the delinquency, the immediate manifestations of which were of less concern to him either in theory or in practice.

Many of these views are now accepted as a matter of course by clinical workers, but in their time they represented remarkable advances in our understanding of delinquent states; and in fact they do not preclude the possibility of formulating detailed classifications. It must be admitted however that Aichhorn was to some extent handicapped by following too exclusively the patterns of symptom formation that had already been established for the neuroses. A broader psychiatric approach would have served him better. Indeed, it is significant that the term psychopathy is never mentioned although many of the cases he described would qualify for this special designation. Of the relation of some delinquencies to the psychoses little or nothing is recorded. Further, although it is true that the symptoms of delinquency must be distinguished from the underlying disease, still they provide valuable information regarding etiology and useful indications for treatment.

As far as therapy is concerned it is no exaggeration to say that Aichhorn's book is not only a mine of information but a source of inspiration and encouragement to all who undertake the arduous and delicate task of handling delinquents. Here again Aichhorn acknowledged his debt to psycho-analytical concepts. 'What', he asked, 'helps the worker most in therapy with the dis-social?' His own answer was 'The transference! And especially what we recognize as the positive transference.' In both out-patient and institutional work his approach was governed almost exclusively by the necessity of stimulating and developing the transference in the interest of re-education. Working often by sheer intuition and seizing every favourable situation, whether fortuitous or specially designed, he sought to modify the pathogenic situation and at the same time to bring about increased stability and synthesis of the ego. 'With the worker's help, the youth acquires the necessary feeling relative to his companions which enables him to overcome the dis-social traits.' The source of the new character formation is the worker himself. 'The word "father-substitute", so often used in connection with remedial education, receives its rightful connotation in this conception of the task.'

To appreciate Aichhorn's contributions to the problem of treatment, it is necessary to recall the strenuous opposition that was once, and in many quarters still is, offered to any course that smacks of 'mollycoddling' the offender or depriving him of the alleged benefits of a rigid discipline. The story of his early experiences with a selected 'aggressive group' deserves to be engrossed on vellum and presented to every official connected however remotely with the handling of delinquents, to say nothing of a multitude of penal reformers. Indeed it should be read with especial care by psycho-analysts themselves. For although Aichhorn's work was at all times governed by psycho-analytical precepts, he was careful to insist that it was in no sense a psycho-analysis. As Freud remarked in his Foreword to the book, 'Psycho-analysis could teach him little that was new of a practical kind, but it brought him a clear, theoretical insight into the justification of his way of acting and put him in a position to explain its basis to other people.'

This is perhaps the most valuable of Aichhorn's contributions to the subject. Psycho-analysis, originally a technique for the treatment of the psycho-neuroses, encounters peculiar difficulties when applied to graver disorders. No very

satisfactory technique has for example been evolved for its use either in the psychoses, where the essential factor of 'accessibility' is greatly diminished, or in the psychopathic disorders, where negative transferences so often obstruct the therapeutic approach. It is significant indeed that the conventional analyst reacts to any suggested modification of his classical technique with a mixture of outraged virtue and uneasy aggressiveness. Yet it is clearly as impossible to apply the classical technique of psycho-analysis to a violent or perverted psychopathic recidivist as to a melancholiac in a state of catatonia. The crises that may occur during the treatment of delinquents and the situations in which the therapist may be compelled to participate in many cases exclude the leisurely and for the most part passive chair-and-couch methods of formal analysis. Aichhorn showed, however, that knowledge of unconscious mechanisms and conflict is essential to the regulation of environmental therapy and influence; and in this book he quotes sufficiently extensively from his own records to give the reader some idea of his methods.

To be sure, there are occasions when his approach seems to be somewhat naïve, and when some of the set-backs he describes might well have been anticipated by him. But perhaps a modicum of naïveté is an asset to the born therapist, if there be such a creature. It is possible too that Aichhorn exaggerated the importance of playing the rôle of 'father-substitute'. The transference is after all to a large extent a repetitive phenomenon, and in neurotic cases its most effective analysis depends on the therapist *not* playing the part assigned to him by the patient. But Aichhorn's work, as has been said, was re-education, not analysis; and its success indicated that playing the rôle of the friendly parent can bring about astonishing readjustments provided it is accompanied by a clear understanding of the patient's unconscious motivations and tricks of defence. In these days when psychiatrists are, sometimes justly sometimes unjustly, accused of all sorts of sins of omission and commission in their handling of delinquents, it is useful to be able to recommend for general reading a book proving convincingly that sympathy and understanding are not necessarily the step-children of folly.

To which it may be added that 'Wayward Youth' should lie open on the desks of all who seek to understand or treat delinquents. The only flaws of the present edition are that it woefully lacks an index and is produced in a format more appropriate to a religious publication. These drawbacks are however compensated by the very reasonable price which renders the book available, as it should be, to the leanest professional purse.

EDWARD GLOVER.

## REVIEWS

THE SHADOW OF THE GALLOWES. By Viscount Templewood, D.C.L., LL.D., Litt.D. (London: Victor Gollancz Ltd. 1951. Pp. 159. Price 8s. 6d.)

This temperate, scholarly, unsentimental and yet moving book leaves the supporters of capital punishment with no argument except blind prejudice. Lord Templewood opens with a short review of the history of the subject from which, incidentally, the sad fact emerges that this country not only is, but long has been, behind its neighbours in its attitude to murder: even in the seventeenth and eighteenth centuries foreign visitors noted with astonishment the frequency of

executions in a state which, in other respects, they looked upon as unusually civilized. Next, the author considers the possibility of discriminating between different degrees of murder. This is not the course that he himself would advocate; but it would at least reduce the number of executions, and would, incidentally, transfer to the courts some of the grievous responsibility which the Home Secretary now carries, and in the discharge of which Lord Templewood has himself clearly suffered very deeply, in deciding on recommendations to mercy. Lord Templewood shows that in penal codes as far apart as those of India and Scotland, such discrimination has been successfully operated. In India, the new Republic adopted in its entirety, after nearly a hundred years' experience of its working under the British Raj, a law which provides four different definitions of murder, and permits the court to pass sentences either of death or of transportation for life. And the Scots, whose code provides for a widely defined category of culpable homicide as well as for a verdict of 'not proven', are demonstrably not more murderous than the English.

The next major argument is the possibility of mistaken identity. Lord Templewood admits that so many precautions are now taken to avoid any miscarriage of justice that it is very unlikely that an innocent man will be hanged. But so long as human judgment is fallible, the risk must remain; and this book quotes a few actual cases of wrongful imprisonment (in one of which the victim very nearly *was* hanged) to show how in rare instances the true facts may not be discovered for many years after conviction.

Most convincing of all is the experience of those countries which have already abolished capital punishment. Great Britain and France are now the 'only two democracies in Europe outside the Iron Curtain in which the death penalty for murder has not been abrogated or abolished'. Comparisons of the incidence of murder before and after the change in these countries gives no support to the view that the abolition of the death penalty leads to more frequent murders. Nor do the abolitionist countries find it impossible to provide sentences which both protect the public and are not more cruel than death itself. Long terms of imprisonment, intelligently used, can be in some degree reformatory; and it must be remembered that many murderers are first offenders, and that the circumstances of their crimes are exceptional and most unlikely to recur: it is, in fact, extremely rare for a released murderer to be guilty of a second killing.

In the course of his argument, Lord Templewood has some telling things to say about the gross inadequacy of the M'Naghten rules, which were after all drafted in 1843 when the 'possibilities exposed by modern psychiatry' were 'inconceivable'. The final chapter contains an exact diary of the procedure, in a prison where an execution is to take place, from 4 p.m. on the preceding day when the hangman arrives at the prison, to the moment when the Governor's notice that the execution has been carried out is posted at the gate. This is unadorned, and terribly effective.

BARBARA WOOTTON.

PERSONALITY AND PSYCHOSIS. By O. W. S. Fitzgerald, M.A., M.D. (London: Baillière, Tindall & Cox, 1951. Pp. viii + 134. Price 12s. 6d.)

This is an essay rather than a documented study, in which an experienced psychiatrist attempts, like many before him, to classify the types of personality



that precede mental illness and partly determine its form and outcome. Dr. Fitzgerald disavows any intention of typing normal personalities: no doubt this accounts for the absence of any reference to recent work by psychologists and biologists which has, by the critical use of statistical concepts, defined more sharply some of the problems inherent in any effort to set up types of personality. Dr. Fitzgerald's approach is the traditional one, dependent on personal standpoint and clinical experience rather than on the explicit analysis of data systematically collected. Jung's familiar introvert-extravert dichotomy is the basis on which a descriptive array is built up, to denote the patient's prepsychotic personality, the general syndrome he exhibits, and to some extent the relationship between his personality and his symptoms. After describing the introvert and the extravert personality, the author devotes several chapters to acquired traits—obsessional and hysterical—which 'may cause the individual to react to stresses in a pathological manner' in contrast to the inborn traits which "are compatible with normal personalities'. In the section on obsessional disorders he acknowledges the debt to Freud for pointing out the relationship between obsessional neurosis and a guilty conscience, but he goes on to suggest, in a brief passage, that psychoanalysis may be a technique of intellectual seduction which makes a man 'deny his most precious heritage, his free will', and perhaps gives him relief from guilt 'by a prostitution of his sense of moral values'—reflections which, if they are to be included in a book of this sort, call for better warrant than an *obiter dictum* affords. A chapter on Paranoid Traits, a number of illustrative case records and a section on practical applications conclude the book.

So personal an expression of diagnostic theory and practice is difficult to appraise from outside. Dr. Fitzgerald declares that the practical value of a diagnostic formula must be judged by its usefulness in making a prognosis or selecting a form of treatment: only those who have learnt and used his method can judge whether, in their hands, it serves these ends. His exposition of it shows a thoughtful and courageous attempt to cope with some very stubborn problems.

AUBREY LEWIS.

JUVENILE DELINQUENCY. By Paul W. Tappan. (New York-Toronto-London: McGraw-Hill Book Company Inc. 1949. Pp. x + 613. Price \$5.00 or 42s. 6d.)

In the few years since its publication Professor Tappan's book, by its successful blending of the legal with the sociological approach, has already won for itself a secure place in criminological literature. His treatment of the subject is, as he writes in his Preface, realistic and unsentimental, and he describes the practices of juvenile courts and other agencies as they are rather than 'as someone may believe they should be'. Although the structure of the book follows traditional lines (nature, extent and causes of juvenile delinquency, juvenile courts, methods of treatment and prevention), the various topics are dealt with in a refreshingly unorthodox manner.

Combining in his person both legal and sociological training—he is professor of sociology and lecturer in law at New York University—the author feels perhaps more acutely than other, strategically less fortunately placed, writers on juvenile delinquency that the 'socio-legal compromise' of the juvenile court may not infrequently fail in actual practice, and one of the most provocative chapters of

the book is, significantly enough, headed 'Confusion in the Court'. There one finds statements such as the following: 'Wherever it can be avoided, the child should not be exposed to court adjudication and the treatment devices pertaining to the court. The very exposure to court itself is often a traumatic and unnecessary experience for the child when he could be dealt with more beneficially under circumstances that do not offer the psychic affront of the juvenile court' (pp. 219-20), and with regard to the non-delinquent or pre-delinquent child he writes: 'Thrusting the admittedly non-delinquent child into such a scene, however well-meant the court's objective may be, is not only unjust but it may well propel him into otherwise avoidable delinquency' (p. 200). As social science techniques cannot accurately predict from maladjustment to delinquency and as juvenile courts fail too often with delinquents, it is not justifiable to apply court procedure to non-delinquents in the hope that delinquency may thereby be prevented (p. 201). Professor Tappan is severely critical of vaguely defined juvenile delinquency laws as found in many states of the U.S.A., with their tendency to extend juvenile court jurisdiction far beyond the offender against the criminal law, and his sympathies in this respect are clearly with the English rather than with the American system, although he would no doubt regard the competence of the juvenile court to deal with care and protection and beyond-control cases as out of place. Pre-trial investigations are in his view 'unsound both sociologically and legally' (p. 213), but he may not realize that in practice the alternative may often lie between having pre-trial inquiries or no inquiries at all. He condemns the slogan of 'individualization of justice' as wholly illusory in view of the available skills and facilities (p. 217) and exposes certain other ambiguities in the basic philosophy of the juvenile court system (does it exist to protect the child or to uphold the authority of the parents? (p. 27)). The chapter on 'Special Courts for Adolescents' is as illuminating as could be expected from the author of 'Adolescent Girls in Court'. His discussion of the arguments for and against the Youth Authority plan is lucid and convincingly in favour of the latter. At the same time, he realizes that opposition to central administration of probation, institutions and after-care might prove too formidable, and he is quite willing, therefore, to compromise in favour of less ambitious schemes (pp. 274-86). Whether or not we agree with all the author's views and criticisms, we cannot but admire the force and clarity with which they are expressed and the mastery of both theory and practical application.

Less controversial but of an equally high standard of critical analysis are the remarks on the meaning of causation and on methods of research (pp. 59 *et seq.*). In the chapter on social conditions it is the exposition of basic principles rather than the presentation of detail that is valuable.

Although, naturally, most of the factual material is derived from American sources and the literature used is almost exclusively American, the non-American reader, too, will find here much food for thought, and there is a short but accurate section on English Approved Schools and Borstals.

Where there is so much to praise, it may be ungrateful to end with a personal request for a minor correction in future editions. The title of the book quoted on p. 492 is not, as somewhat ominously stated, 'Social Reconstruction through Criminal Law' (not even 'Criminal Law and Social Reconstruction', p. 587), nor, which is of course a matter of opinion, does it exhibit an 'unrealistic faith in law as an instrument of broad social reconstruction' (p. 164). Its object is rather

to show that the law, too, has some part to play in the reconstruction of society, and that—a point with which the author may possibly agree—the criminal law can to some extent be replaced by administrative law.

H. M.

PROSTITUTION AND THE LAW. By T. E. James, M.A., B.C.L. (London: William Heinemann Medical Books Ltd. 1951. Pp. ix + 160. Price 21s.)

Conditions in the publishing trade are difficult, but even so, is it justifiable for a book to be published nearly two years out of date? The Legal Aid Act received the Royal Assent on July 30, 1949. Yet this book refers only to the Bill. The author says in relation to this Bill: 'If the result should be merely to subsidise litigation, such intimate problems as those involved in matrimonial problems will not be submitted very frequently.' In fact, between 90 and 95 per cent. of applications for legal aid have been concerned with matrimonial problems.

The author believes that 'the inferior status ascribed to women, together with their exclusion hitherto from the equal wage packet, has resulted in the street profession of the prostitute being mostly female'. He believes that inequality of pay between the sexes is a big factor in the problem of prostitution. He gives much information about the legal approach to the problem in other countries and quotes many who have worked in this field. He faces the practical difficulties in the way of reformed methods for dealing with prostitutes who offend against the law. 'It is considered', he writes, 'that little, if any, good would be achieved merely by amendments to the law. . . . The energy expended would be much better applied in dealing with the very roots of the problem.' But the author is less clear about the nature of these roots. His suggestions for reform are also somewhat indefinite.

'It would seem that here at least in the western democracies the problem of prostitution could be faced in earnest by the law.' But, as the author freely admits, under our legal system offenders can only be helped if they agree to be helped. This is the great obstacle, but who would dare suggest that this principle should not be applied to those found guilty of being 'common prostitutes'? The author is hopeful that 'a more informal procedure' in court would be beneficial and believes that numerous appearances, if so dealt with, would have the effect of undermining a prostitute's 'wish to continue in her profession'. But he does not set out in detail the kind of informalities that he seeks. Under present conditions many of the younger prostitutes are in fact helped to a better way of life. That is the best justification for existing methods.

On one point protest is necessary. The author writes: 'Where promotion and pay depend on the number of charges brought there is bound to be some unpleasantness in the handling of such cases by the police.' Does this method of promotion and pay exist in any English police force?

CLAUD MULLINS.

PATERSON ON PRISONS. Edited by S. K. Ruck. (London: Frederick Muller Ltd. 1951. Pp. 192. Price 15s.)

Down from Oxford and installed in a tenement building in Bermondsey, A. P., as the late Sir Alec Paterson was always called by his colleagues, found some difficulty in getting accepted by his neighbours, until one night when in executing a repair, he found he needed a hammer. Going to his neighbours on



the same staircase as one in need—even if only of a hammer—he found the sovereign road to friendship. So he wrote in 'Across the Bridges' a few years later, 'The first great struggle is for men to realize that across the bridges there is a great need. . . . Some, moreover, need to learn that there is a bridge, after all, which will bear them to these countless homes of poverty.'

This remarkable man, the friend of bishops and burglars, was a prison commissioner for twenty-five years. He left behind him no systematic treatise on penology. Indeed he once said to the writer that he doubted whether 'we want a science of hurting people'. He would have had, I suspect, little time for prediction tables. He did leave, however, a mass of reports, minutes and occasional papers. Mr. S. K. Ruck has with devoted skill woven this mass into a coherent pattern, using only Paterson's own language, so that one is saved otherwise unavoidable repetition. The chapters therefore range from 'Why Prisons?', from the great report on American Prisons, by way of others on 'Recidivism and the Indeterminate Sentence' and 'Discipline' to the fierce, passionate protest against 'Devil's Island', addressed originally to the French Ministry of Justice.

In these pages the reader will find Paterson's gift for swift, imaginative phrase—'a prison is a monastery of men unwilling to be monks' his impatience with the worship of merely 'negative gods', the spring and ground of his faith, and some of the reasons why, as the Prime Minister writes in his 'Foreword'. A. P.'s 'truest memorial . . . will be found in the hearts of many hundreds of men and lads who had the good fortune to come under his influence and enjoy his friendship'.

R. DUNCAN FAIRN.

MY SIX CONVICTS. By Donald Powell Wilson. (London: Hamish Hamilton. 1951. Pp. 335. Price 15s.)

Dr. Wilson is well known for his writings on psychology. This is an amusing and popular book of recollections of three years as a research psychologist in the Federal 'tough' penitentiary of Fort Leavenworth. The period is probably the early 'thirties—during the great reform carried out by Sanford Bates. The six convicts made up the staff (largely self-appointed) of his research—a safe-breaker, a gangster-racketeer responsible for forty murders, etc. The author's affectionate and amusing account of their attempt to become psychologists is written with sensitiveness and a novelist's sense of character. Much of the book, however, is devoted to anecdotes—often amusing too—about the underground life of a large prison—the grapevine, feuds, and an organization that seems to be able to obtain almost any contraband; to excursions into criminal psychology, and the astonishing brutalities practised until very recently in some state prisons. True as they are, these show a little too much of the horror and drama of the film script. However, his frankness will introduce the reader quickly to the complexity of the American penal and social scene—in one place a great prison reform movement, and high ideals; in another, an early nineteenth century brutality, and areas of social turmoil in which no one claims much difference between the morals of judge, attorney, police, and prisoner.

This is a book which few readers will want to buy, especially at the price; but anyone who gets hold of a copy will find it amusing and stimulating.

T. C. N. GIBBENS.

ASPECTS OF FORM. Edited by Lancelot Law Whyte. (London: Lund Humphries. 1951. Pp. 249. Price 21s.)

To the student of delinquency this book is at once a sign of the times, a portent and a warning. Ostensibly a symposium on Form in Nature and Art, it enlists the services of a baker's dozen of distinguished natural scientists and a brace of psychologists interested in Gestalt, who, on the whole, converge towards the conclusion that form plays a decisive rôle in man's relation to his environment and therefore in his understanding of nature and of himself. In this respect the book may be regarded as a bedtime story for those who like their soporifics thick. Unfortunately some of the writers do not leave well alone. The physiologist, for example, dealing with activity patterns in the human brain, remarks in passing, 'In people with an abnormal tendency to aggressive behaviour, the bad-tempered folk sometimes labelled psychopaths, theta activity is often prominent and may occupy quite a large area of the temporal and parietal lobes of the brain'; and again, 'when emotional aggravation is added to the theta flicker, the two effects summate, both electrically and physiologically, producing in a normal equable subject a transient resemblance to an aggressive psychopath.' This is equivalent to saying that people with constitutionally sensitive skins become peevish in dry and dusty weather and, moreover, that if you stamp on the toes of a person with a fairly normal skin-sensitiveness he too will become peevish for the time being. There is of course no objection to this kind of statement save that it is questionable whether electro-physiological technicalities provide the most suitable form or pattern in which to state a complex psychological problem, and that the stress laid on constitutional factors tends to detract from the significance of developmental factors in mental disorder. The particular instance quoted does show, however, that the natural scientist is prepared to butcher the psychology of motive to provide a metaphysical holiday for the artist.

E. G.

PSYCHOTIC ART. By Francis Reitman, M.B., D.P.M. (London: Routledge & Kegan Paul Ltd. 1950. Pp. 180. Price 16s.)

The variety of human impulses and their interrelated mechanisms stimulate the enquirer to explore every possible avenue to explain the terminal forms of human behaviour. Psychosis remains a still unfathomed ocean of mental and neurological events. Art therapy is the latest excursion into the sea of discovery. Psycho-analysis has attempted with some promise of success to explain art impulse and expression but the author of this volume has found little use in psychopathology. His approach is mainly neurological, coloured by Gestalt Psychology, and he uses these disciplines with considerable skill and originality. Moreover, he discloses his own sensibility to the plastic arts and one gathers a first-hand knowledge as well as considerable acquaintance with the relevant literature. As regards formal structures, particularly in schizophrenic productions, he has some useful things to say, but his apparent distaste for psychopathology has led him to miss the significance of content viewed as a dynamic source of expression and of disguise, avoidance and symbolization. It would be of great interest to consider the art production of delinquents. This is an interesting and scholarly volume, original, but not altogether comprehensive or satisfying.

E. M.

PSYCHOANALYTIC STUDY OF THE CHILD. Vol. V. (London: Imago Publishing Co. Ltd. 1950. Pp. 410. Price 35s.)

This collection of essays maintains the high level of quality attained by the earlier volumes, and it stresses the growing tendency to develop psycho-analytic thought in harmony with other branches of psychology.

The study of child psychology, even in the recent past, has disclosed a dangerous dichotomy between two approaches which yielded results but distorted our perspective. Observational studies produced unrelated phenomena through lack of dynamic concepts, and psycho-analytic data derived from adult analysis only reach the child by reconstruction and detours, or by hypotheses about infant thought and feeling difficult to substantiate. To-day child analysis paralleled with long-term observations promises to give answers but only to those who are patient and start with an acceptable canon of concepts. Dr. Hartmann's opening essay on 'Psycho-analysis and Development Psychology' is a valuable contribution to this new attitude and he makes the vital point that whereas in other disciplines—general psychology and sociology—the observer is really outside the field of the object's integral life, in analysis, by transference identification, the observer enters into the life of the object. This is on all fours with the technique of functional penetration used in modern sociological field work.

If, as Freud claimed, analysis must throw a light on so-called normal psychology, then we must see that our longitudinal studies of development provide a reciprocal corrective of analytic studies by observational studies and *vice versa*.

All the essays in the volume are worthy of close attention, but a selection will be made only of those that are concerned with delinquency or are relevant to this special study. Of them K. R. Eissler's essay is of practical importance in laying down lines of treatment empirically rather than theoretically deduced.

Transference relations are difficult to establish with delinquents as compared with neurotics in whom it is brought about by virtue of the psychic history and structure of the disorder. With the delinquent immersed in his own narcissistic structure and defences, active measures must be instituted to produce a rapport from which true transference will ultimately emerge and then create therapeutic situations. The first phase, says Eissler, is to give the patient a sense of the physician's omnipotence—i.e. a capacity to help the patient, in the first flash of relationship, to meet all difficulties following from his or her delinquent conduct. The delinquent wants to see every experience as a novelty—a surprise: the schizophrenic is immersed in the familiar. In fact, these attitudes are as the sides of a coin to one another. The unknown which the delinquent would explore with all its perils, is the subjective, almost *déjà vu* of these so-called novelties and are obvious to the analytically prepared observer. One's behaviour towards the delinquent in the first phase in providing surprise is one key to open—not the future, but the patient's unfulfilled past. His search for novelty is a quest for concreteness in gratification—which only the past possesses.

Scrutinizing the moves of Czech and Chinese parents, Martha Wolfenstein considers the pre-moral phases of child development. Before the schedules of training in moral conduct are applied the mother is already regulating her infant's life in the light of the mores of her culture-group. Nevertheless, psycho-analysis cannot establish frontier lines between early training and the final assumption of moralistic parent-child relationship. Punishment or painful experiences come very early into all cultures, and each has instruments which, to the author, seem



dynamically significant and apparently related to pregenital regulations, e.g. beating the buttocks with a kitchen spoon in Bohemia and with hair brushes in modern America, and pinching of the ear in Syria, and a body swaddling whip in Russia! It seems daring enough to relate these social variants to the early training problems of children. The moot point is, do these revivify pre-moral situations and therefore form culture patterned perversions? Moreover we have in this situation a possible commentary on a certain type of penal awards.

Bettelheim and Sylvester present a less speculative and more clinically verifiable aspect of the issue in 'Morals and Delinquency'. We have learnt from Aichhorn, following Freud, that delinquents have a very deep morality of a kind, and a loyalty to their own group of fellow offenders. Discrepancies between parental moral standards are a rich source for the production of personality deviations and asocial conduct.

Beres' and Obers' article entitled 'The Effects of Extreme Deprivation in Infancy on Psychic Structure in Adolescence' deserves special attention seeing that this deprivation, particularly of the mother, has been regarded by some as a crucial factor in production of asociality and delinquency. The conclusions are based upon clinical studies of deprived children, but the authors admit the research is incomplete as certain early training factors were unexplored and therefore statistical analysis would have been invalid. The fact that many cases made a satisfactory adjustment, self-determined and social, raises the question—how is traumatization in infancy overcome, what determines the differences that emerge as indications of profound maladjustment? The therapeutic instruments used were—no action apart from autonomous modification, social case work, psychotherapy, social opportunities. In the absence of individual studies no general conclusion can be drawn from this interesting enquiry. The need, however, for a stable relation with an adult would appear to be the one irreducible factor.

The common belief that delinquent behaviour is consequent upon either inborn moral obliquity or breakdown in the acceptance or development of moral values needs careful study if psychiatry is not to be at variance with the law as the crystallization of social norms. The essays by Wolfenstein and Bettelheim and Sylvester are therefore significant.

E. M.

CHILDHOOD AND SOCIETY. By Erik H. Erikson. (London: Imago Publishing Co. Ltd. 1951. Pp. 397. Price 25s.)

As psychopathology advances it impinges more and more on the social life of man, and sociological studies become increasingly enmeshed in individual psychology.

The child presents to the world and to himself vexatious social problems, and Dr. Erikson, an analyst of long experience, attempts in this volume to elucidate the child's social development. What a pity it is that so valuable a subject should be enshrouded in lengthy statements and clouded with unnecessary technicalities! There are passages in this volume describing cases and certain primitive cultures which are lucidly written and enthralling reading. The chapter on social-psychological issues in America is clear and penetrating when the author does not immerse his thesis in theory. But no sooner does he enter the realm of scientific analysis and synthesis than he becomes enmeshed in the most

maddening prolixity. For many chapters he promises to elucidate the basic problem of Ego-development but he leaves us uninformed as to his views. Psychoanalysts of repute have tackled this problem with some measure of success, but Dr. Erikson has not carried us any further on this road despite his very penetrating and frequently constructive asides. His primary attempt was to bridge psycho-analysis and sociology but there are too many lacunae for a safe crossing.

E. M.

**MATERNAL CARE AND MENTAL HEALTH.** By John Bowlby, M.A., M.D. (Geneva: World Health Organization, 1951. Pp. 179. Distributed in the United Kingdom by H.M. Stationery Office. Price 10s.)

Surveys of the literature of Child Psychiatry in recent years have shown the increasing influence of the child-mother relation in encouraging or retarding mental development.

Legislation and public enquiries have also shown the drift of the interest. It was extremely perspicacious therefore of the World Health Organization to appoint Dr. Bowlby to study the problem as a wide human issue.

In the monograph Dr. Bowlby not only surveyed the existing literature, but had the opportunity to use his observations in America, England and Europe to add his own views and suggest lines of future enquiry in the immediate field and its neighbourhood.

That disturbances in child-mother relations are of outstanding significance has been known to everyone working in the field of psycho-analysis, general child psychiatry and family welfare. But Dr. Bowlby has done a great service in reviewing the research of others, as well as his own. This brings out the fact that most observers using scientific methods—psycho-analytic, observational, and statistical—have come to the same conclusion, namely, that early deprivation is somehow 'equivalent to a vitamin deficiency.' The necessary emotional and social environment of a babe is its mother; her nutritive rôle, her security of manner, her pervasive love are ingredients of growth, both mental and physical.

His thesis, and that of others, shows that if we were to plot a psycho-physical growth gradient of a child in the early years, its shape and trend would vary with the degree and length of separation from whatever cause. It is, of course, not quite clear what sort of child can endure this or that amount of deprivation, and when it has its optimal and/or minimal effects. That some fostered children and institutionalized children (foundlings, hospitalized, etc.) show both physical and psychological arrest is no longer in question, and any reference to heredity determinants must be scrutinized with great care before sheltering behind destiny. Some children show lack of interest, reduced power of learning, lack of social rapport, and even a complete absence of capacity to love others. That delinquency may be tied up with the latter loveless condition has been stated with some force by the author. Yet we are not altogether clear what selective processes are at work. It is true that mother-child communion is most intense in the early months of life, and in some measure it endures. But the child's life is soon to become part of a more extended field of emotional forces in which father and siblings play no small part. The development of a child soon becomes a vector of many interrelated forces and if the child's ego development and moral nature are to be fully comprehended they will be understood only if all forces are considered.

Dr. Bowlby carries his enquiry into the realm of adoption, illegitimacy, fostering, substitute families, and in each chapter he shows how widely he has explored the subject in two continents.

This monograph is important not merely because it brings its psychological importance before the psychiatric and general public, but largely because it has made the subject an issue which belongs to public health in the widest sense. It should be read and digested and discussed by all who care for the future of psychiatry and the welfare of the child, and particularly by those who are planning future research as their work may confirm and extend the thesis it brings forward.

E. M.

INTRODUCTION TO SOCIAL PSYCHOLOGY. By Otto Friedman. (London: Sylvan Press. 1950. Pp. 220. Price 10s. 6d.)

Most books on social psychology are bulky volumes that merely intimidate the general reader. On the other hand, they exasperate the more advanced student by assuming that he does not know anything about individual psychology. Trying to appeal to the scholar and to the general public at the same time they can rarely serve their purpose, which is too ambitiously conceived. Dr. Friedman does not fall into this error. He gives a lucid introduction to a broad subject, keeps it at a popular level, and (how rare and how sensible!) suggests for further reading only those books that can be understood by *his* readers.

Social psychology is the product of integration of the social sciences, but mainly a blend of Freudian and 'academic' approach. So is Dr. Friedman's book, and if he is guilty of minor inaccuracies trying to integrate various schools of thought which are hard to reconcile, he at least gains in clarity of exposition.

The writer is not interested in petty delinquency, but seems fascinated by the problems of mass murder and mass oppression, by crime highly organised and disguised as politics. His analysis of Nazi and Communist mentality and propaganda is not dispassionate, but it adds interest to the book. It is also clear that the author writes about some recent events from his own experience.

This little book can be highly recommended to laymen for its brevity and lucidity. It will be useful to students of delinquency who want to see their subject in a wider context. There is a good index and a well selected bibliography.

T. GRYGIER.

THE HOWARD JOURNAL (Official Organ of The Howard League for Penal Reform), Vol. VIII, No. 2, 1951. Price 2s. 6d.

The current number of *The Howard Journal* fully maintains its traditional high standard. Prison problems are again the most prominent of its topics, discussed not only in Mr. George Benson's review of the recent Report of the Commissioners for 1949, but also by Mr. Fox, the Chairman of the Commission; by Dr. Mackwood, one of the psychotherapists at Wormwood Scrubs; by Mr. Spencer, who, in an article on the place of the social worker in the prison system, makes a strong case for the appointment in two or three prisons of trained case-workers, if necessary paid by a voluntary body; by Miss Fry, who deals with colonial matters; and in 'Three Views on After-Care', contributed by such



well-known experts as Governor Vidler of Maidstone, Mr. Frank Dawtry and Lieut.-Colonel Radcliffe. In Mr. Fox's article, the story told in the Report of 1949 is brought up to date with a wealth of interesting detail, and throughout the recommendations made in the Prison Commission's well-known Five-Year Plan of 1945 are compared with their actual achievements. As Mr. Fox justly claims, 'broadly, the principles set out in the memorandum have been consistently developed' in the face of difficulties which might well have been regarded as insuperable. It is good news that plans for the 'East-Hubert Institution' for psychopathic and similarly difficult categories of prisoners are making progress.

Lieut.-Colonel Radcliffe who, as Secretary of the Management Research Group, possesses an expert knowledge of industrial conditions related to social problems, contributes a particularly searching paper on 'Industry and the Discharged Prisoner' in which, among many other practical points, he states that 'it is quite impossible for any one to say whether a discharged prisoner, first offender or otherwise, will go straight in future or not'—an uncertainty which may well increase the reluctance of would-be employers of ex-prisoners to give them a chance. This shows the vital importance, not only for the sentencing policy of the Courts but equally for after-care work, of the prognostic studies done by the Gluecks and recently begun in this country, notably by Dr. Roper in his Wakefield survey (see this *Journal*, Vol. I, p. 253).

H. M.

PSYCHIATRY FOR SOCIAL WORKERS. By Lawson G. Lowrey. 2nd Edition. (New York: Columbia University Press. London: Geoffrey Cumberlege. 1950. Pp. xv + 385. Price 30s.)

The author is a well-known authority in the field of ortho-psychiatry. The exposition is clear, although not as well planned as would appear from the table of contents. The approach is modern and scientifically sound but the classification of drives and some theoretical discussion may be questioned, and their usefulness for the purpose of this particular book doubted. The fact that in schizophrenia 'empathic index is low' (p. 193) may not convey much to a social worker who is left wondering how 'diminished activity' can 'develop' (p. 203).

The problem of delinquency is barely mentioned, mainly in the chapters on mental deficiency and on psychopathic personality: psychopathy is regarded as essentially untreatable (p. 263).

There is a good index and selected reading list; the latter might be more useful to a post-graduate in psychiatry or in psychology than to a social worker. To sum up: a good book, on the whole, but heavy going for the beginner.

T. GRYGIER.

ANY WIFE OR ANY HUSBAND. By Medica. (London: Heinemann. 1950. Pp. 159. Price 7s. 6d.)

Although neither the title nor the absence of the author's name inspires confidence, this is a very sensible book, of great value to medical practitioners and social workers. Marital problems are treated essentially on psycho-analytic lines, and their exposition is designed to convince the uninitiated. Delinquency is not

mentioned, but in view of the fact that marital friction, separation or divorce of parents is commonly regarded as predisposing to delinquent conduct of children, books of this sort can serve an extremely useful purpose in preventive work.

T. GRYGIER.

CRIME AND THE POLICE. By Anthony Martienssen. (London: Secker and Warburg. 1951. Pp. xv + 256. Price 10s. 6d.)

LAG'S LEXICON. By Paul Tempest. (London: Routledge and Kegan Paul. 1950. Pp. viii + 234. Price 10s. 6d.)

Mr. Martienssen has produced a brief, informative and very readable account of the Police Force, its principles, training, organization, and special departments, its various activities and methods of detection, and has given a number of interesting illustrations of the application of police methods to various types of crime. The accuracy and quality of the book may be judged from the fact that it has received an unofficial blessing from Scotland Yard. Such criticisms as the author advances are very modestly and temperately stated. The book should be in the possession of those delinquency workers who, approaching the problem from psychological and sociological angles, are often crassly ignorant of police organization, control and method.

Mr. Tempest, basing his observations on first-hand experience of prison life, has endeavoured to perform a similar service for the prison system and for prison populations. For this purpose he has adopted the technique of the 'Glossary'. The total effect is impressionistic but not unsuccessful. His work is, as the author himself agrees, a combination of a reference manual and a bedside book for beginners. As might be expected, the argot of the habitual delinquent throws a good deal of light on his general mentality. Mr. Tempest's definition of a 'psychiatric unit' is a model of fair statement. Amongst the more macabre of his annotations is that concerning the prisoner awaiting execution, namely that 'his smoking is limited for the sake of his health'.

E. G.

THE RETARDED CHILD. By Herta Loewy. (London: Staples Press. Enlarged Edition, 1951. Pp. 160. Price 10s. 6d.)

This book draws attention to the need for a systematic approach in the education of children afflicted with slight mental and/or physical defect. Methods for training and educating from babyhood to adolescence are given in detail.

It is clear that the author's own approach to her pupils lends vitality to her methods. She recognizes the insecurity lying behind anti-social trends. In her dealings with these she aims at developing a sense of security through affection, while she does not hesitate to enforce rational discipline. It is doubtful, however, if some of her methods can be generally recommended. It is open to question whether a person who has a sound emotional relationship with a child can plunge him into cold water to stop screaming without bad effect to that child. Such measures are certainly harmful if carried out by any casual person of lesser integrity.

Unfortunately, the intuition which obviously stands Miss Loewy in good stead in her dealings with her pupils is not supported by clarity of thinking. It is difficult, for example, to know what she means when she states of a destructive child:

'His mental scope being beyond his own comprehension, let alone his ability, he becomes an anti-social nuisance.'

There is little new in this book for the trained teacher. Teaching methods are, however, systematically described and provide a useful guide to parents and social workers. It is written in a graphic style and the obvious sincerity of the author goes far to offset any criticisms as to details of method, to say nothing of lack of precise definition. On the whole a stimulating book.

ETHEL PERRY.

EXHIBITIONISM. By N. K. Rickles, B.S., M.D. (Philadelphia, London, Montreal: J. P. Lippincott Co. 1951. Pp. 198. Price 40s.)

In its breadth of approach and balanced assessment of the various factors giving rise to this variety of sexual offence, Dr. Rickles' book can be justly described as a model. Starting with an anthropological account of the problem, he sets forth the various psychological and sociological theories regarding exhibitionism developed in the literature, gives a statistical survey of the subject and discusses various definitions and classifications of the condition. The core of the book consists of a psychiatric assessment of family factors and of the clinical condition of exhibitionists whom he regards as essentially neurotic and compulsive types. After describing the findings arrived at by Rorschach and other psychological tests, Dr. Rickles outlines his system of treatment of exhibitionism and discusses its medico-legal aspects. The book is rounded off with a number of selected case-histories of a somewhat too condensed type.

Although the author's psychiatric approach is influenced mainly by Freudian concepts, his theories give evidence of a good deal of independent thinking. He stresses, for example, the decisive influence of maternal factors, particularly of the dominating and aggressively masculine type of mother, prudish and hostile to men. These types, he maintains, use their sons as a compensation for their lack of a male sex-organ: they provoke excessive narcissism in the son and an over-active Œdipus complex which leads to the development of a compulsive psycho-neurotic personality. So impressed is Dr. Rickles by this familial factor, that he considers treatment should be carried out in most cases after an enforced separation of the son from the mother. For the rest his treatment seems to consist of a modified and shortened 'analysis' with or without pentothal, together with various measures of rehabilitation and social readjustment.

No doubt some of his etiological views and psycho-therapeutic recommendations will not gain unqualified assent: still his main contention that exhibitionism is essentially a psycho-pathological state, the socio-legal aspects of which are of secondary significance, will scarcely be contested. The book can and should be read by workers who have no particular psychiatric orientation. At the same time it is sufficiently advanced and documented to command the respectful attention of sexologists and psychiatrists alike. Its only serious drawback is the exorbitant price at which it is issued. Even allowing for the current rate of exchange, it is much too expensive for a book of its size.

E. G.



## ABSTRACTS AND REFERENCES

(Under the direction of W. R. Bett (London) with the co-operation of John C. Spencer (London).)

### CRIMINOLOGY AND SOCIOLOGY

R. CRESSEY: 'Criminological Research and the Definition of Crimes.' *The American Journal of Sociology*, 1951, **56**, 546-51.

The concept 'crime' must be restricted to behaviour which is so defined by the criminal law, yet assumptions of proper scientific methodology make it necessary to define rigorously by phenomena under investigation in criminology. Owing to lack of causal homogeneity within the general category 'crime' and within the legal categories designating specific crimes, these two propositions present an apparent contradiction. The contradiction can in part be resolved by definition of homogeneous units *within* these categories, but for complete resolution definitions of homogeneous units must transcend legal categories.

Author's Abstract.

R. P. J. VERNET: 'Caractère et relèvement des détenus.' *Revue de Criminologie et de Police Technique*, (Janvier-Mars) 1951, **5**, No. 1, 20-32.

Professor Vernet, continuing his analysis of criminal types (see *B.J.D.*, II, p. 66), distinguishes a number of types: the indifferent ones (*les mous*), the feeble-minded (*les débiles*), the toughs (*les durs*) and the explosives.

GUSTAVE CORNAZ: 'Visite à Scotland Yard.' *Revue de Criminologie et de Police Technique*, (Janvier-Mars) 1951, **5**, No. 1, 37-46.

Major Cornaz, Commandant de la gendarmerie vaudoise, Lausanne, describes the work of Scotland Yard. While mainly concerned with questions of police technique, he makes the interesting remark that the number of persons annually killed in London is, proportionally, smaller than that in Switzerland (in 1948, 1 per 8,500 inhabitants against 1 per 6,000), which provides another argument against the widely-held theory that murder is more frequent in big cities.

H. M.

MILTON L. BARRON: 'Juvenile Delinquency and American Values.' *American Sociological Review*, 1951, **16**, 208-16.

Research by American sociologists on social values has increased considerably in recent years. If existing theory is to be utilized in future research certain conceptual, theoretical and methodological needs will have to be recognized. (a) Social values will have to be refined conceptually in at least three dimensions. (b) Hypotheses are required to explain the relation of inconsistent values held by the delinquent to inconsistency in the delinquent's behaviour. (c) A more versatile utilization of methodological techniques is needed. A discussion by Joseph H. Greenberg follows the article.

MARSHALL B. CLINARD: 'Sociologists and American Criminology.' *Journal of Criminal Law and Criminology*, 1951, **41**, 549-77.

This paper was written for the Second International Congress of Criminology, Paris, 1950. Sociologists are generally sceptical of individualistic explanations of

criminal behaviour in terms of constitutional and abnormal personality patterns. The origin of crime must be sought in definitions present in the culture in the form of competing value systems or culture conflict. An encouraging feature of present-day research is the possibility that sociology and psychiatry, working together, may be able to evolve a more complete theory of criminal behaviour. Sociologists have made use of a wide variety of techniques, including ecology, personal documents and prediction studies. Hypotheses must be empirically proven by the use of rigorous scientific methods.

A. J. REISS, Jr.: 'Delinquency as the Failure of Personal and Social Control.' *American Sociological Review*, 1951, **16**, 196-208.

The author attempts to isolate a set of personal and social controls which are associated with delinquent recidivism and to evaluate them as prognostic of recidivism. The evaluation of the predictors is carried out in terms of the theory of prediction. Data were obtained from the juvenile court records of 1,110 male young delinquents between the age of eleven and seventeen. Predictors were selected from the three fields of control in primary groups, community and institutional controls, and personal controls. R. concludes that efficient prediction of delinquent recidivism is obtained when items are used as predictors which are measures of the adequacy of personal controls of the individual *and* his relation to social controls in terms of the acceptance of or submission to social control.

J. C. S.

WALTER A. LUNDEN: 'Auto-Theft.' *The Iowa Sheriff*, 1951, **23**, No. 7, 5-23.

The analysis of auto-theft committed in Iowa State shows that 22.1 per cent. of offenders found guilty of this crime are under eighteen years of age, 48 per cent. are under twenty-one, and 69 per cent. are under twenty-five. It is therefore a 'youthful offence'. Many cars are recovered after they have served their purpose, which is often limited: 'joy-riding' or quick travel in order to commit other offences. For that reason statistics of cars recovered are as valuable as statistics of cars stolen, since many cars are reported as recovered although they had not been reported as stolen.

T. GRYGIER.

G. DRAGOTTI: 'Dinamica e profilassi della criminalità.' *Policlinico [Sezione Pratica]*, (May 28) 1951, **58**, 697-8. (Two references.)

G. GALY: 'Fugue et vagabondage juvénile.' *Psyché, Paris*, (September) 1950, No. 47, 626-32.

W. R. B.

### CRIMINAL PSYCHOPATHOLOGY

B. KARPMAN: 'The Sexual Psychopath.' *Journal of the American Medical Association*, (June 23) 1951, **146**, 721-6.

The general public has but vague ideas of what a sexual criminal is, calling him a sex maniac and regarding him as some terrible monster. The physician's attitude is hardly more enlightened. Laws are not clear as to the specific definition of sexual crimes. The terms 'sexual psychopath' and 'sexual psychopathy' have no legitimate place in psychiatric nosology or dynamic classification. The

definition of sexual psychopathy includes such behaviour as exhibitionism, peeping, transvestism, masturbation and obscenity, if committed in public. Sexual psychopathy in relation to paraphilias is discussed, and the differences are noted between the ordinary paraphiliac neuroses and those that become anti-social. The chief characteristics of sexual psychopathy are described. The law fails to prevent, correct, or deter sexual criminals from their activities, so that the problem is basically extra-legal. Punishment has never been an effective deterrent in sexual crimes. The proper treatment of the sexual psychopath is psychotherapy, or, better, proper sexual education in childhood. What is needed above all is prophylaxis, but of this there is as yet virtually nothing. In conclusion the author says: 'Every year perpetrators of rape and other sexual criminals are being executed or sentenced to long terms of imprisonment. Those who have been executed have carried the secret of their pathology with them. Those who are imprisoned are not being studied. The state gains nothing from a death sentence; society loses. The human psychopathologist has the same reaction toward this as a general pathologist would have were he continuously denied autopsy after autopsy with no opportunity to learn of the structure and function of disease processes. How far would medicine have advanced under such conditions?

'There must be an organized formulation of disease. A concerted effort to study the structure and function of sexual aberrations is needed; for this the sexual psychopath provides the best subject. Teams of trained workers to search the records of courts to help learn of the various types of crimes and criminals should be provided; from this it should be possible to develop a workable, if only tentative, classification of the various sub-types within this grouping. An institute where cases could be studied in the fullest possible detail is also necessary.'

G. K. STÜRUP: 'Behandling af kriminelle psykopater' (Treatment of psychopathic criminals). *Nordisk Medicin*, (May 9) 1951, **45**, 730-4. (Four references.)

A review of the principles of treatment of personality deviations, as developed at Herstedvester, Denmark.

G. DEVEREUX: 'Neurotic Crime vs. Criminal Behaviour.' *Psychiatric Quarterly*, (January) 1951, **25**, 73-80. (Conclusions; 4 references.)

Psycho-analytical interpretation and treatment of criminal behaviour is generally less convincing and successful than that of neurotic behaviour. The difference between neurosis, perversion, and habitual criminality is defined. The purpose of this paper is to differentiate between the neurotic 'illegalist', whose symptomatic defences sometimes fail him, and the criminal, whose defences work overtime.

M. SCHMIDBERG: 'On Recidivism.' *American Journal of Psychotherapy*, 1950, **4**, 286-92.

Law breakers may be habitual offenders or 'accidental' ones. The former constitute the real danger and problem to society. Some of the 'recidivists' (habitual criminals) are fundamentally abnormal and anti-social. Present penal methods are apt to produce recidivism. Early social help and psychiatric treatment should be given to psychopaths, 'pre-delinquents' and unstable people, and there should be constructive treatment in prison, followed by help or treatment after the patient has left prison and has to face a difficult reality.



M. SCHMIDTBERG: 'Psychiatric-Social Factors in Young Unmarried Mothers.' Mimeographed. N.D. Pp. 11. 20 East 84th Street, New York City 28.

The most stabilizing factor is the family relation. Only sufficient affection, security, and companionship can enable a girl to bear postponement of her sexual impulses satisfactorily. When social structure and accepted codes crumble, promiscuity and delinquency tend to spread. The more tolerant attitude of society has weakened a young girl's defences and has made it harder for her to resist temptation. Often circumstances rather than psychological factors decide whether a girl has sexual relations. A girl from a poor home, for example, may give herself in order to get the little luxuries which her parents cannot afford to give her. Failure to use birth control is due to a mixture of ignorance and inhibition, plus difficulty in obtaining contraceptives. The social case-worker, dealing with unmarried mothers, will be faced with basically abnormal cases. The less difficult ones can benefit from case-work; the more deeply disturbed require psychiatric treatment. Whatever the causes of unmarried motherhood in young girls, the consequences are essentially social and must be handled as such.

W. R. B.

*Federal Probation*, (September) 1950, 14, No. 3.

This issue is devoted to the sex offender and contains a symposium of articles from the medical, judicial, legal, sociological and law-enforcement point of view. Dr. Philip Q. Roche classifies the clinical varieties of deviant sexual behaviour in three groups: (1) sexual behaviour showing a distortion of quality of the sexual striving; (2) sexual behaviour in which the object of the sexual striving is abnormal; (3) sexual behaviour in which distortion in quality and in abnormal object are combined. The sex offender is the responsibility of the state in no less measure than the mentally ill. The way out is to remove the prosecution of such offenders from the criminal process and place them in the commitment process. In an article on the sex offender and the Court, Judge Braude claims that in the face of such divergent views in the community towards the sex offender, the courts can exercise an important stabilizing influence. Criminal sexual psychopath laws in Illinois have proved inadequate and there is need for fresh legislation, avoiding the use of the term 'psychopathic'. Indeterminate sentences without treatment are not the answer to the problem of the convicted sex offender. The institution to which he is committed must be provided with facilities for therapeutic treatment. Dr. David Abrahamsen discusses the important points arising from his intensive study of 102 sex offenders in Sing-Sing. Approximately 50 per cent. could be restored to the community through psychiatric help. A special institute for treatment, training and research is strongly recommended. Professor Paul W. Tappan examines the sex offender laws in the United States. He finds that they are inoperative—or nearly so—in most jurisdictions and points out some of their weaknesses.

This issue also contains a reprint of a paper by Claud Mullins from the *Journal of Mental Science*, April, 1949, on Psychiatry in the Criminal Courts.

J. C. S.

H. POWELSON and R. BENDIX: 'Psychiatry in Prison.' *Psychiatry*, (February) 1951, 14, 73-86. (Conclusions.)

- GERALD H. J. PEARSON: 'Emotional Disorders of Children.' (London: George Allen & Unwin Ltd., 1951. Pp. 368. Price 18s. net.)  
Pp. 279-98: 'Delinquency in Children'; 'A Classification of Delinquency.'

M. BACHET: 'Les conceptions biologiques concernant la délinquance et les interventions sur le lobe frontal des délinquants.' *Annales Médico-Psychologiques*, (June) 1941, **109**, ann., t. 2, 22-41. (Seven references.)

W. R. B.

### PSYCHOLOGICAL TESTS

- J. A. HOLMES: 'Occupational Aptitudes of Delinquents.' *Journal of Genetic Psychology*, (March) 1951, **78**, 47-54. (Five figures; summary and conclusions; 9 references.)

This study was undertaken to find out if the abilities of delinquents are high enough for them to hold their own with non-delinquents in various industrial occupations. The scores of delinquent boys on standardized tests show that jobs compatible with their aptitudes can be found.

- A. DE OLIVEIRA PERIERA: 'Psicodiagnóstico Miocinético do Professor Emilio Mira y López. Observações Estatísticas.' *Archivos Brasileiros de Psicotécnica*, (June) 1950, **2**, 29-58. (English summary.)

An analysis of the myokinetic psycho-diagnosis test in 200 normal adults, 40 murderers, 528 immigrants, etc.

- A. ZOLLIKER: 'Der Rorschach'sche Formdeuteversuch bei Sexualdelinquenten.' *Schweizer Archiv für Neurologie und Psychiatrie*, 1951, **67**<sup>1</sup>, 132-8. (Three tables; summary.)

- J. BOTWINICK and S. MACHOVER: 'A Psychometric Examination of Latent Homosexuality in Alcoholism.' *Quarterly Journal of Studies on Alcohol*, (June) 1951, **12**, 268-72. (Two tables; summary; 9 references.)

W. R. B.

### TREATMENT AND PENOLOGY

- JOHN MACKWOOD: 'Group Therapy in Prisons.' *Howard Journal*, 1951, **8**, 104-12.

The author was appointed as psychotherapist at Wormwood Scrubs Prison in 1943. The new ward which enabled group treatment to be started was opened towards the end of 1946. He discusses the methods employed in the treatment, and such questions as length of stay and size of group. Morale is far higher than that of individual offenders in the main halls. Each member is seen against the background of the others. Each lets it be known to the others what he is 'in' for. Rejection by the group is an adverse and, on the whole, accurate prognosis that that member is unripe for treatment. The therapist as the real power in the group sessions in keeping them together contrives to remain in the background. The liberation of energy which arises from the improvement in the individual prisoner cannot easily be provided for except in special types of prison. Some sound bridge is needed to cover the gap between the treatment begun in prison and the demands



of the outside world. Dr. Mackwood suggests the need for some kind of outpatient system in conjunction with a non-prison treatment centre.

NEGLEY K. TEETERS: 'The Prison Systems of England.' *Journal of Criminal Law and Criminology*, 1951, **41**, 578-89.

T. C. N. GIBBENS: A reply to Dr. Teeters' article. *Journal of Criminal Law and Criminology*, 1951, **41**, 590-99.

Professor Teeters concludes as a result of his tour in the summer of 1949 that, although the British prison system has made progress in developing open prisons, in opening up new institutions, and in encouraging a few governors to develop better methods of treatment, in general it is not far removed from what is read about the days of Ruggles-Brise or even Du Cane.

Dr. Gibbens in his reply agrees that conditions are often bad, but considers that the real test is whether existing resources are being wisely used. He contrasts the American and English penal systems, English conservatism compared with American readiness to change, the shortness of terms of imprisonment in England by comparison with America, and the great strength of security measures in many American institutions. He argues that Professor Teeters has exaggerated the significance of the outward and visible differences between the systems. He agrees that there are too few psychiatrists in English prisons, and that there are some important lessons which America has to teach. (See also our Editorial.)

L. W. Fox, C.B., M.C.: 'Hopes and Achievement: A Survey of the Prison Administration for England and Wales since 1945. *Howard Journal*, 1951, **8**, 81-7.

The Chairman of the Prison Commission recalls the outline of the proposals set out in the Five-year Plan which was printed as an Appendix to the Commissioners' Annual Report for 1945. The original principles have been consistently developed, and attention has been directed to the basic problem of 'training'. Four regional training prisons have been established for men. The majority are, or will be, at least of medium security. For women the provision of several small prisons is unhappily still impossible. 'Individualization of punishment' by the development of a system of classification has been taken considerably further than before the war. The institution of Corrective Training and Preventive Detention under the Criminal Justice Act, as well as the proposed East-Hubert institution, raises the question of the urgency of the new building programme.

J. C. S.

NORMAN FENTON: 'The Graduate School of Correctional Service.' *School and Society*, (June 23) 1951, **73**, 385-8.

Dr. Fenton stresses the close connection between the work of the educator and that of the specialist staff of correctional institutions, and the need for the development of a graduate school of correctional service 'to integrate what is now being done in piecemeal fashion into an ordered, meaningful, and better integrated programme of training'.

H. M.



- W. A. LUNDEN: 'The Tyranny of Time.' Reprinted from *The Presidio*, (March) 1950, 18.

A series of interviews and group discussions conducted by the writer with prison and reformatory inmates suggests that the acute perception of time disintegrates the personality of the prisoner. The prisoner lives against time, and fears what will happen to him and his friends *in* time. Identification with the isolation of prison life is an impossible task because a man cannot identify himself with a social vacuum. Isolation is the main characteristic of social hell in which his life is passing without any purpose, and from which he tries to escape into a world of unreality. Fear of time and a hopeless battle against it are normal reactions for imprisoned men.

T. GRYGIER.

- M. SCHMIDBERG: 'The Parolee Reports.' Reprinted from *Focus*, (January) 1950. National Probation and Parole Association, 1790, Broadway, New York, 19. Pp. 4.

When a newly-released prisoner reports for the first time, his parole officer is interested not so much in what the man has been in the past, but what he will be in the future. There is no magic formula for answering this question. With rare exceptions the parolee does not know his own mind. Even before he has had a hearing, where he can judge the parole board's fairness or lack of it, he may have become hostile and distrustful. The parole officer has to deal with a man who looks on parole as a symbol of injustice and imprisonment. This conception must be altered to represent freedom, hope, and social helpfulness, over and above surveillance. To make genuine contact with his charge, the parole officer must become human and real. He must identify himself with the parolee and speak to him on his own emotional level. He has a great responsibility, which requires above average ability, special training, tact, and common sense. He must have a sound psychiatric orientation.

W. R. B.

#### MENTAL HEALTH

- E. HJELT: 'Zur Psychohygiene der Delinquenz.' 'Erfahrungen aus einem Jugendgefängnis.' *Zeitschrift für Kinderpsychiatrie*, (May) 1951, 18, 46-8. (English summary.)
- J. BOWLBY: 'Maternal Care and Mental Health.' *Bulletin of the World Health Organization*, 1951, 3<sup>3</sup>, 355-533. (Summary; 159 references.)

W. R. B.

#### CRIMINAL LAW

- R. M. JACKSON: 'A Note on Broadmoor Patients'. *The Cambridge Law Journal*, 1951, 11, 57-66. (Two tables.)

A brief survey of the legal position in English law of insane offenders before and after the passing of the Criminal Justice Act, 1948, with special emphasis on the practical administration of the system of which the author had some first-hand experience at the Home Office. In connection with difficulties of interpretation arising from the wording of section 24 of the Act, he stresses the fact that modern

English law is developing far beyond the traditional problem of whether or not insanity is a 'defence' in law.

H. M.

H. NAUJOKS: 'Versuchte Abtreibung oder straflose Vorbereitungshandlung?' *Deutsche Medizinische Wochenschrift*, (April 13) 1951, 76, 525-6.

E. FRAENKEL: 'La responsabilité dans la délinquance névrotique.' *Psyché, Paris*, (December) 1950, 5, 857-66.

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